## Case 17-21515 Doc 1 Filed 07/19/17 Entered 07/19/17 15:59:27 Desc Main Document Page 1 of 59

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | ☐ Chapter 7                   |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ■ Chapter 13                  | ☐ Check if this an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself  |  |   |
|-----|---|--|---|
|     |   | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |  |   |
|     | Write the name that is on   | Toshira                                  |   |
|     | your government-issued picture identification (for example, your driver's license or passport).                   | First name                               | First name                                    |
|     |   | Middle name                              | Middle name                                   |
|     | Bring your picture  | Myles                                    |   |
|     | identification to your meeting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | All other names you have  |  |   |
|     | used in the last 8 years  |  |   |
|     | Include your married or maiden names.   |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-7763                              |   |

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Case number (if known)

Debtor 1 Toshira Myles

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|---|---|---|
| 1. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years<br>Include trade names and<br>doing business as names | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)  |
|    |   | EINs  | EINs  |
| 5. | Where you live  | 1505 N Linder Ave   | If Debtor 2 lives at a different address:   |
|    |   | Chicago, IL 60651  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code  |
|    |   | Cook<br>County  | County  |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |
|    |   |   |   |

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Case number (if known) Debtor 1 Toshira Myles

| ⊃ar  | t 2: Tell the Court About   | our Bar       | nkruptcy Ca | se                                    |   |                            |                            |   |
|--|---|---------------|-------------|---------------------------------------|---|----------------------------|----------------------------|---|
| 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S. (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |   |               |             |                                       |   | S.C. § 342(b) for Individu | uals Filing for Bankruptcy |   |
|  | choosing to file under  | ☐ Cha         | pter 7      |                                       |   |                            |                            |   |
|  |   | ☐ Cha         | pter 11     |                                       |   |                            |                            |   |
|  |   | ☐ Cha         | pter 12     |                                       |   |                            |                            |   |
|  |   | ■ Cha         | pter 13     |                                       |   |                            |                            |   |
|  |   |               |             |                                       |   |                            |                            |   |
| 3.   | How you will pay the fee  | a<br>0        | bout how yo | u may pay. Typica attorney is submitt | illy, if you are paying                     | the fee yourself,          | , you may pay with cash    | r local court for more details<br>a, cashier's check, or money<br>a a credit card or check with |
|  |   |               |             |                                       | ments. If you choos<br>Official Form 103A). | e this option, sigr        | n and attach the Applica   | ation for Individuals to Pay  |
|  |   |               | request tha | t my fee be waive                     | ed (You may request                         |                            |                            | oter 7. By law, a judge may,  |
|  |   |               |             |                                       |   |                            |                            | of the official poverty line that this option, you must fill out                                |
|  |   |               |             |                                       |   |                            | rm 103B) and file it with  |   |
|  |   |               |             |                                       |   |                            |                            |   |
| 9.   | Have you filed for bankruptcy within the last 8 years?  | □ No. ■ Yes.  |             |                                       |   |                            |                            |   |
|  | iast o years:   | <b>–</b> 165. | District    | ilables                               | When  | 7/02/15                    | Casa number                | 45 22054  |
|  |   |               | District    | ilnbke                                |   |                            | Case number                | 15-22851  |
|  |   |               | District    | ilnbke                                | When  | 5/28/14                    | Case number                | 14-19805  |
|  |   |               | District    |                                       | When  |                            | Case number                |   |
| 10.  | Are any bankruptcy cases pending or being   | ■ No          |             |                                       |   |                            |                            |   |
|  | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes.        |             |                                       |   |                            |                            |   |
|  |   |               | Debtor      |                                       |   |                            | Relationship to y          | ou  |
|  |   |               | District    |                                       | When  |                            | Case number, if            | known   |
|  |   |               | Debtor      |                                       |   |                            | Relationship to y          | rou   |
|  |   |               | District    |                                       | When  |                            | Case number, if            | known   |
| 11.  | Do you rent your  | ■ No.         | Go to li    | ine 12.                               |   |                            |                            |   |
|  | residence?  |               | Has vo      | ur landlord obtaine                   | ed an eviction judam                        | ent against vou a          | and do you want to stay    | in your residence?  |
|  |   | ☐ Yes.        |             | No. Go to line 12.                    |   | on against you c           | and do you want to stay    | m your rootdorloo:  |
|  |   |               |             |                                       |   | n Eviction Judam           | ent Against Vou (Form      | 101A) and file it with this   |
|  |   |               | П           | bankruptcy petitio                    |   | . Evicaori daagiii         | on Agamst 100 (1 01111     | 1017 g and me it with this  |

Document Page 4 of 59 Case number (if known) Debtor 1 Toshira Myles Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Document Debtor 1 Toshira Myles

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Toshira Myles Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Toshira Myles Signature of Debtor 2 Toshira Myles Signature of Debtor 1 Executed on July 19, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Toshira Myles Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Thomas G. Stahulak                             | Date          | July 19, 2017                 |
|--|---------------|-------------------------------|
| Signature of Attorney for Debtor                   |               | MM / DD / YYYY                |
| Thomas G. Stahulak Printed name                    |               |                               |
| Stahulak & Associates, L.L.C. / GetFiled Firm name |               |                               |
| 53 W. Jackson Blvd., Suite 652                     |               |                               |
| Chicago, IL 60604                                  |               |                               |
| Number, Street, City, State & ZIP Code             |               |                               |
| Contact phone (312) 662-1480                       | Email address | ecf@stahulakandassociates.com |
| 6288620  |               |                               |
| Bar number & State                                 |               |                               |

|                                 |                          | 170611111         | eni Paue o ui ba |  |
|---------------------------------|--------------------------|-------------------|------------------|--|
| Fill in this inform             | mation to identify your  | case:             |                  |  |
| Debtor 1                        | Toshira Myles First Name | Middle Name       | Last Name        |  |
| Debtor 2<br>(Spouse if, filing) | First Name               | Middle Name       | Last Name        |  |
| United States Ba                | nkruptcy Court for the:  | NORTHERN DISTRICT | OF ILLINOIS      |  |
| Case number _                   |                          |                   |                  |  |
| (ii kilowii)                    |                          |                   |                  |  |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets  |              |                               |
|-----|---|--------------|-------------------------------|
|     |   | Your as      | ssets<br>of what you own      |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 0.00                          |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$           | 6,337.00                      |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$           | 6,337.00                      |
| Par | 2: Summarize Your Liabilities   |              |                               |
|     |   |              | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                | \$           | 14,077.77                     |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$           | 0.00                          |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$           | 78,799.63                     |
|     | Your total liabilities  | \$           | 92,877.40                     |
| Par | 3: Summarize Your Income and Expenses   |              |                               |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$           | 1,877.53                      |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$           | 1,662.53                      |
| Par | 4: Answer These Questions for Administrative and Statistical Records  |              |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                    | ur other sch | nedules.                      |
| 7.  | Yes What kind of debt do you have?  |              |                               |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for bounded purposes." 11 U.S.C. \$ 101(9). Fill out lines 8.00 for statistical purposes. 28 U.S.C. \$ 150 | a personal,  | family, or                    |

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |    |
|----|--|----|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              | \$ |

2,562.87

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

|  | Docume   | nt Page 10 of 59   |  |  |
|--|--|--|--|--|
| s information to identify your   | case and this filing:  |  |  |  |
| Toshira Myles  |  |  |  |  |
| First Name   | Middle Name  | Last Name  |  |  |
|  |  |  |  |  |
| ling) First Name   | Middle Name  | Last Name  |  |  |
| ates Bankruptcy Court for the:   | NORTHERN DISTRICT O  | OF ILLINOIS  |  |  |
|  |  |  |  |  |
| nber   |  |  |  | ☐ Check if this is an  |
|  |  |  |  | amended filing   |
|  |  |  |  |  |
| al Form 106A/R   |  |  |  |  |
| _  | <b>4</b>   |  |  |  |
| edule A/B: Prop  | perty  |  |  | 12/15  |
| best. Be as complete and accura<br>n. If more space is needed, attach<br>ery question.   | ate as possible. If two married<br>n a separate sheet to this form   | I people are filing together, both a<br>n. On the top of any additional pag  | re equally responsible for sup   | plying correct   |
| escribe Each Residence, Building   | g, Land, or Other Real Estate  | You Own or Have an Interest In   |  |  |
| own or have any legal or equitabl  | le interest in any residence, b  | uilding, land, or similar property?  |  |  |
|  |  |  |  |  |
| Go to Part 2.  |  |  |  |  |
| Where is the property?   |  |  |  |  |
| !h- V V-bi-l   |  |  |  |  |
| escribe rour venicles  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| <sub>ke</sub> . Tovota   | Who has an intere  | est in the property? Check one   | Do not deduct secured claim  |  |
| ke: Toyota   |  | est in the property? Check one   | the amount of any secured  | claims on Schedule D:  |
| del: Camry LE 4 Cyl  | ■ Debtor 1 only  | st in the property? Check one  | the amount of any secured<br>Creditors Who Have Claim  | claims on Schedule D: os Secured by Property.  |
| camry LE 4 Cyl 2009  | Debtor 1 only Debtor 2 only  |  | the amount of any secured Creditors Who Have Claim  Current value of the   | claims on Schedule D: as Secured by Property.  Current value of the  |
| camry LE 4 Cyl<br>2009   | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 1 and Debtor 1   | ebtor 2 only   | the amount of any secured<br>Creditors Who Have Claim  | claims on Schedule D: os Secured by Property.  |
| camry LE 4 Cyl ar: 2009 proximate mileage: 190   | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 1 and Debtor 1   |  | the amount of any secured Creditors Who Have Claim  Current value of the entire property?  | claims on Schedule D:<br>as Secured by Property.  Current value of the<br>portion you own?   |
| camry LE 4 Cyl ar: 2009 proximate mileage: 190   | Debtor 1 only Debtor 2 only Debtor 1 and De At least one of t  | ebtor 2 only   | the amount of any secured Creditors Who Have Claim  Current value of the   | claims on Schedule D: as Secured by Property.  Current value of the  |
| del: Camry LE 4 Cyl ar: 2009 proximate mileage: 190 ner information:   | Debtor 1 only Debtor 2 only Debtor 1 and De At least one of t  Check if this is (see instructions)   | ebtor 2 only he debtors and another community property   | the amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$5,675.00  | claims on Schedule D: as Secured by Property.  Current value of the portion you own?   |
| craft, aircraft, motor homes, A les: Boats, trailers, motors, personal and Housescribe Your Personal And Your Pers | Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and De At least one of the Check if this is (see instructions)  ATVs and other recreations conal watercraft, fishing vessional watercraft, fishing vessional watercraft.  | ebtor 2 only he debtors and another community property  al vehicles, other vehicles, and sels, snowmobiles, motorcycle a   | the amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$5,675.00  d accessories ccessories  y entries for   | claims on Schedule D: is Secured by Property.  Current value of the portion you own?  \$5,675.00   |
| camry LE 4 Cyl ar: 2009 proximate mileage: 190 per information:  craft, aircraft, motor homes, A es: Boats, trailers, motors, pers   | Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and De At least one of the Check if this is (see instructions)  ATVs and other recreations conal watercraft, fishing vessional watercraft, fishing vessional watercraft.  | ebtor 2 only he debtors and another community property  al vehicles, other vehicles, and sels, snowmobiles, motorcycle a   | the amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$5,675.00  d accessories ccessories  y entries for  y entries for  | claims on Schedule D: is Secured by Property.  Current value of the portion you own?  \$5,675.00  \$5,675.00   |
| craft, aircraft, motor homes, A les: Boats, trailers, motors, personal and Housescribe Your Personal And Your Pers | Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and De At least one of the Check if this is (see instructions)  ATVs and other recreations conal watercraft, fishing vessional watercraft, fishing vessional watercraft.  | ebtor 2 only he debtors and another community property  al vehicles, other vehicles, and sels, snowmobiles, motorcycle a   | the amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$5,675.00  d accessories ccessories  by entries for  Cpri  | claims on Schedule D: is Secured by Property.  Current value of the portion you own?  \$5,675.00   |
|  | Toshira Myles First Name  ates Bankruptcy Court for the:  al Form 106A/B  al F | Toshira Myles First Name Middle Name  Allege Bankruptcy Court for the:  Morthern District Conber  Morthern District Conber | Toshira Myles First Name Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  All Form 106A/B  Edule A/B: Property  Legory, separately list and describe items. List an asset only once. If an asset fits in more than on the space is needed, attach a separate sheet to this form. On the top of any additional pagery question.  Lescribe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In the space is needed, attach as a space is needed, attach and, or Other Real Estate You own or have any legal or equitable interest in any residence, building, land, or similar property?  Lescribe Your Vehicles  We have a sidence or equitable interest in any vehicles, whether they are registed way, lease, or have legal or equitable interest in any vehicles, whether they are registed way, lease, or have legal or equitable interest in any vehicles, whether they are registed way. | Toshira Myles First Name Middle Name Last Name ates Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  All Form 106A/B  Edule A/B: Property  egory, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for sup. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case any question.  escribe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In pown or have any legal or equitable interest in any residence, building, land, or similar property?  so to Part 2.  Where is the property?  escribe Your Vehicles  wn, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. |

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1  | Case 17-21515 Toshira Myles   | Doc 1               | Filed 07/19/17<br>Document | Entered 07/19/17 15:59:2<br>Page 11 of 59<br>Case number (if kn                      | 27 Desc Main  |
|---|---|---------------------|----------------------------|--|---|
| ■ Yes.  | Describe  |                     |                            | <u> </u>   | ,   |
|   | Used pe   | ersonal hou         | sehold furniture and g     | goods/items  | \$300.00  |
| ■ No  |   |                     |                            | oment; computers, printers, scanners; mu   | ısic collections; electronic devices  |
| Example ■ No  | bles of value<br>les: Antiques and figurines;<br>other collections, memo                              |                     |                            | oks, pictures, or other art objects; stamp,  | coin, or baseball card collections;   |
| Example ■ No  | ent for sports and hobbie<br>les: Sports, photographic, ex<br>musical instruments                     |                     | other hobby equipment;     | bicycles, pool tables, golf clubs, skis; car   | ioes and kayaks; carpentry tools;   |
| ■ No  | <b>ns</b> bles: Pistols, rifles, shotguns  Describe   | s, ammunitior       | n, and related equipmen    | t  |   |
| □ No  | s  bles: Everyday clothes, furs.  Describe  | , leather coat      | s, designer wear, shoes    | , accessories  |   |
|   | Used pe   | ersonal cloth       | ning and accessories       |  | \$300.00  |
| ■ No □ Yes.  13. Non-fa Examp ■ No □ Yes.  14. Any ot | Describe  prescribes: Everyday jewelry, cost  Describe  prescribes: Dogs, cats, birds, hors  Describe | ees<br>old items yo |                            | ding rings, heirloom jewelry, watches, ge<br>ncluding any health aids you did not li |   |
|   | the dollar value of all of yo<br>art 3. Write that number ho  |                     |                            | ny entries for pages you have attached   | \$600.00  |
|   | scribe Your Financial Assets<br>vn or have any legal or eq  |                     | est in any of the follow   | ring?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No  | oles: Money you have in you   |                     |                            | osit box, and on hand when you file your   | petition  |
| Official For  | m 106A/B  |                     | Schedule A/B: F            | Property   | page 2  |

Case 17-21515 Doc 1 Filed 07/19/17 Entered 07/19/17 15:59:27 Desc Main Document Page 12 of 59 , Case number (if known) Debtor 1 Toshira Myles Cash on hand \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Fifth Third Bank \$40.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401(k) through employer - NO CASH SURRENDER \$1.00 **VALUE** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them... Official Form 106A/B

| Debtor      | 1 Toshira Myles  | Document   | Page 13 of 59  Case number (if known)                   |   |
|-------------|--|--|---|---|
|             | nses, franchises, and other o                                |  |   |   |
| ■ No        | - · · · · · · · · · · · · · · · · · · ·                      |  | n holdings, liquor licenses, professional licens        | ses   |
| Money       | or property owed to you?                                     |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No        |  | out them, including whether you alre                                       | eady filed the returns and the tax years                |   |
| Exa<br>■ No |  |  | ort, maintenance, divorce settlement, propert           | y settlement  |
| Exa<br>■ No | benefits; unpaid loans                                       |  | nefits, sick pay, vacation pay, workers' compe          | ensation, Social Security   |
| Exa<br>□ No |  | insurance; health savings account ny of each policy and list its value.    | (HSA); credit, homeowner's, or renter's insura          | nce   |
|             |  | any name:  | Beneficiary:  | Surrender or refund value:  |
|             |  | life insurance through employe<br>CASH SURRENDER VALUE                     | r   | \$1.00  |
| If you son  | ou are the beneficiary of a living neone has died.           | ue you from someone who has di<br>trust, expect proceeds from a life in    | ed<br>nsurance policy, or are currently entitled to rec | ceive property because  |
| Exa<br>■ No | amples: Accidents, employment                                | ther or not you have filed a lawsu<br>disputes, insurance claims, or right | it or made a demand for payment<br>s to sue             |   |
| ■ No        | -  | d claims of every nature, includir   | g counterclaims of the debtor and rights to             | o set off claims  |
| ■ No        | financial assets you did not o es. Give specific information | already list   |   |   |
|             | _  |  | ny entries for pages you have attached                  | \$62.00   |
|             |  |  |   |   |

Case 17-21515 Doc 1 Filed 07/19/17 Entered 07/19/17 15:59:27 Desc Main Page 14 of 59
Case number (if known) Document Debtor 1 Toshira Myles 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$5,675.00 57. Part 3: Total personal and household items, line 15 \$600.00 Part 4: Total financial assets, line 36 58. \$62.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$6,337.00 \$6,337.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$6,337.00

|                     |                         | 17(7(.1111))      |             | . / |
|---------------------|-------------------------|-------------------|-------------|-----|
| Fill in this inform | nation to identify your | case:             |             |     |
| Debtor 1            | Toshira Myles           | Middle Name       | Last Name   |     |
| Debtor 2            | Filst Name              | Middle Name       | Last Name   |     |
| (Spouse if, filing) | First Name              | Middle Name       | Last Name   |     |
| United States Bar   | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |     |
| Case number         |                         |                   |             |     |
| (if known)          |                         |                   |             |     |
|                     |                         |                   |             |     |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo  | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|--------------------------------------|------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Chec | ck only one box for each exemption.                             |                                    |
| Used personal household furniture and goods/items                                      | \$300.00                             |      | \$300.00  | 735 ILCS 5/12-1001(b)              |
| Line from <i>Schedule A/B</i> : 6.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Used personal clothing and accessories   | \$300.00                             |      | \$300.00  | 735 ILCS 5/12-1001(a)              |
| Elle from <i>Generalie Avb.</i> 11.1   |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Cash on hand Line from Schedule A/B: 16.1  | \$20.00                              |      | \$20.00   | 735 ILCS 5/12-1001(b)              |
| Enterior constant 772. To. 1   |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking: Fifth Third Bank Line from Schedule A/B: 17.1                                | \$40.00                              |      | \$40.00   | 735 ILCS 5/12-1001(b)              |
| Elle from <i>Generalie PAB</i> . 17.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| 401(k): through employer - NO CASH<br>SURRENDER VALUE                                  | \$1.00                               |      | \$1.00  | 735 ILCS 5/12-1006                 |
| Line from Schedule A/B: 21.1   |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |

Case 17-21515 Doc 1 Filed 07/19/17 Entered 07/19/17 15:59:27 Document Page 16 of 59 Case number (if known) Debtor 1 Toshira Myles Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Term life insurance through employer -215 ILCS 5/238 \$1.00 \$1.00 NO CASH SURRENDER VALUE 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Desc Main

| Ca                             | ase 17-21515               | Doc 1 Filed 07/19/17  Document   | Page 1           | ea 07/19/17 15::<br>7 of 50                            | 59:27 Desc N                                 | iain                     |
|--------------------------------|----------------------------|--|------------------|--|--|--------------------------|
| Fill in this infor             | mation to identify you     |  | Paue I           | 7 (11:39   |  |                          |
|                                |                            |  |                  |  |  |                          |
| Debtor 1                       | Toshira Myles First Name   | Middle Name  | Last Name        |  |  |                          |
| Debtor 2                       |                            |  |                  |  |  |                          |
| (Spouse if, filing)            | First Name                 | Middle Name  | Last Name        |  |  |                          |
| United States Ba               | ankruptcy Court for the    | : NORTHERN DISTRICT OF IL  | LINOIS           |  |  |                          |
| Case number                    |                            |  |                  |  |  |                          |
| (if known)                     |                            |  |                  |  | ☐ Check                                      | if this is an            |
|                                |                            |  |                  |  | amend  | ded filing               |
| 0((()))                        | 400D                       |  |                  |  |  |                          |
| Official Forr                  |                            |  |                  |  |  |                          |
| Schedule                       | D: Creditors               | Who Have Claims  | Secure           | d by Propert   | у  | 12/15                    |
|                                | e Additional Page, fill it | If two married people are filing toget<br>out, number the entries, and attach in   |                  |  |  |                          |
| 1. Do any creditors            | s have claims secured b    | y your property?   |                  |  |  |                          |
| ☐ No. Chec                     | k this box and submit t    | his form to the court with your othe   | r schedules. \   | You have nothing else t                                | o report on this form.                       |                          |
| Yes. Fill in                   | n all of the information   | below.   |                  |  |  |                          |
| Part 1: List A                 | II Secured Claims          |  |                  |  |  |                          |
|                                |                            | more than an a secured delim list the or   | a ditar aggretal | Column A   | Column B                                     | Column C                 |
| for each claim. If n           | nore than one creditor has | more than one secured claim, list the cr<br>s a particular claim, list the other credito<br>ical order according to the creditor's nar | rs in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Santande                   | r Consumer USA             | Describe the property that secures   | the claim:       | \$14,077.77  | \$5,675.00                                   | \$8,402.77               |
| Creditor's Nam                 | ne                         | 2009 Toyota Camry LE 4 Cyl<br>miles  | 190,000          |  |  |                          |
| PO Box 5                       |                            | As of the date you file, the claim is apply.  Contingent   | : Check all that |  |  |                          |
|                                | t, City, State & Zip Code  | ☐ Unliquidated   |                  |  |  |                          |
|                                | ., с.,,, с с,, с           | ☐ Disputed   |                  |  |  |                          |
| Who owes the de                | ebt? Check one.            | Nature of lien. Check all that apply.  |                  |  |  |                          |
| Debtor 1 only                  |                            | ☐ An agreement you made (such as   | mortgage or se   | ecured   |  |                          |
| Debtor 2 only                  |                            | car loan)  |                  |  |  |                          |
| Debtor 1 and D                 | ebtor 2 only               | ☐ Statutory lien (such as tax lien, me   | echanic's lien)  |  |  |                          |
| ☐ At least one of              | the debtors and another    | ☐ Judgment lien from a lawsuit   |                  |  |  |                          |
| ☐ Check if this c community de |                            | Other (including a right to offset)  | Purchase         | Money Security   |  |                          |
| Date debt was inc              | 11/30/12                   | Last 4 digits of account nun   | nber             |  |  |                          |
|                                |                            |  |                  |  |  |                          |
| Add the dollar v               | value of your entries in C | Column A on this page. Write that nur  | nber here:       | \$14,07  | 7.77   |                          |
| If this is the last            | page of your form, add     | the dollar value totals from all pages   |                  | \$14,07  |  |                          |
| Write that numb                | er here:                   |  |                  | μ ι τ, υ ι   |  |                          |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                    | Case 17-21313 DC   | Document  | Page 18 of 59                                      | 99.27 Desc Main  |
|--------------------|--|---|--|--|
| Fill in            | this information to identify your car  |   |  |  |
| Debto              | r 1 Toshira Myles  |   |  | $\neg$   |
|                    | First Name   | Middle Name   | Last Name  |  |
| Debto              |  | A4111 A1  |  |  |
| (Spouse            | e if, filing) First Name   | Middle Name   | Last Name  |  |
| United             | d States Bankruptcy Court for the:   | NORTHERN DISTRICT OF ILL  | INOIS  |  |
| Case               | number   |   |  |  |
| (if know           |  |   |  | ☐ Check if this is an  |
|                    |  |   |  | amended filing   |
| ∩ffic              | ial Form 106E/F  |   |  |  |
|                    | edule E/F: Creditors Wh  | o Have Unsecured  | Claims   | 12/15  |
|                    |  |   |  | ONPRIORITY claims. List the other party to   |
| Schedu<br>eft. Att | ach the Continuation Page to this page.<br>nd case number (if known).  | ed by Property. If more space is n<br>If you have no information to rep | eeded, copy the Part you need, fill it o           | ly secured claims that are listed in<br>ut, number the entries in the boxes on the<br>le top of any additional pages, write your |
| Part 1             |  |   |  |  |
| _                  | o any creditors have priority unsecured o  | laims against you?  |  |  |
| •                  | No. Go to Part 2.  |   |  |  |
|                    | Yes.   |   |  |  |
| Part 2             | List All of Your NONPRIORITY   | Unsecured Claims  |  |  |
| 3. Do              | any creditors have nonpriority unsecur   | ed claims against you?  |  |  |
|                    | No. You have nothing to report in this part.   | . Submit this form to the court with y                                  | our other schedules.                               |  |
|                    | Yes.   |   |  |  |
| un<br>tha          | st all of your nonpriority unsecured clain<br>secured claim, list the creditor separately for<br>an one creditor holds a particular claim, list that<br>art 2. | r each claim. For each claim listed,                                    | identify what type of claim it is. Do not lis      | t claims already included in Part 1. If more   |
|                    |  |   |  | Total claim  |
| 4.1                | CBE Group  | Last 4 digits of acco   | ount number 3974                                   | \$1.00   |
|                    | Nonpriority Creditor's Name 1309 Technology Pkwy   | When was the debt i   | incurred?  |  |
|                    | Cedar Falls, IA 50613  | When was the debt   |  |  |
|                    | Number Street City State Zlp Code  | As of the date you fi   | ile, the claim is: Check all that apply            |  |
|                    | Who incurred the debt? Check one.  |   |  |  |
|                    | Debtor 1 only  | ☐ Contingent  |  |  |
|                    | Debtor 2 only  | ☐ Unliquidated  |  |  |
|                    | Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |  |
|                    | ☐ At least one of the debtors and another  | 01  | ITY unsecured claim:                               |  |
|                    | Check if this claim is for a commu   | _   |  |  |
|                    | debt Is the claim subject to offset?   | Obligations arising report as priority claim                            | g out of a separation agreement or divorc          | e that you did not   |
|                    | <u> </u>   |   | ns<br>or profit-sharing plans, and other similar c | dobto  |
|                    | ■ No   | ·   | -  | ICDIO  |
|                    | ☐ Yes  | Other. Specify  |  |  |

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| Debloi | l osnira Myles                                    | Case number (if know)   |            |
|--------|---|---|------------|
| 4.2    | City of Chicago *                                 | Last 4 digits of account number   | \$1,795.00 |
|        | Nonpriority Creditor's Name Department of Finance | When was the debt incurred?   |            |
|        | P.O Box 88292<br>Chicago, IL 60680-1292           |   |            |
|        | Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply   |            |
|        | Who incurred the debt? Check one.                 |   |            |
|        | Debtor 1 only                                     | ☐ Contingent  |            |
|        | ☐ Debtor 2 only                                   | ☐ Unliquidated  |            |
|        | ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed  |            |
|        | ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |            |
|        | ☐ Check if this claim is for a community          | ☐ Student loans   |            |
|        | debt Is the claim subject to offset?              | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|        | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
|        | Yes   | Other. Specify  |            |
| 4.3    | Commonwealth Edison                               | Last 4 digits of account number 7763  | \$1,537.14 |
|        | Nonpriority Creditor's Name                       | When we the debt in sured   |            |
|        | 1919 SWIFT DR<br>CLAIMS & COLLECTIONS             | When was the debt incurred?   |            |
|        | Oak Brook, IL 60523                               |   |            |
|        | Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply   |            |
|        | Who incurred the debt? Check one.                 |   |            |
|        | ■ Debtor 1 only                                   | ☐ Contingent  |            |
|        | Debtor 2 only                                     | ☐ Unliquidated  |            |
|        | ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed  |            |
|        | ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |            |
|        | ☐ Check if this claim is for a community          | ☐ Student loans   |            |
|        | debt Is the claim subject to offset?              | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |            |
|        | No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
|        | Yes   | Other. Specify  |            |
| 4.4    | Commonwealth Financial                            | Last 4 digits of account number 92N1  | \$1.00     |
|        | Nonpriority Creditor's Name<br>245 Main St        | When was the debt incurred?   |            |
|        | Scranton, PA 18519                                | When was the dept incurred:   |            |
|        | Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply   |            |
|        | Who incurred the debt? Check one.                 |   |            |
|        | ■ Debtor 1 only                                   | ☐ Contingent  |            |
|        | ☐ Debtor 2 only                                   | ☐ Unliquidated  |            |
|        | ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed  |            |
|        | ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |            |
|        | ☐ Check if this claim is for a community          | ☐ Student loans   |            |
|        | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |
|        | Is the claim subject to offset?                   | report as priority claims   |            |
|        | No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
|        | ☐ Yes   | Other. Specify  |            |

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Case number (if know)

| Debit | I osnira Myles   | Case number (if know)   |        |
|-------|--|---|--------|
| 4.5   | Commonwealth Financial   | Last 4 digits of account number 04N1  | \$1.00 |
|       | Nonpriority Creditor's Name 245 Main St  | When was the debt incurred?   |        |
|       | Scranton, PA 18519  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |        |
|       | ■ Debtor 1 only  | ☐ Contingent  |        |
|       |  |   |        |
|       | Debtor 2 only  | ☐ Unliquidated  |        |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |        |
|       | At least one of the debtors and another  | Student loans   |        |
|       | ☐ Check if this claim is for a community debt  Is the claim subject to offset?           | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |        |
|       | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |        |
|       | Yes  | Other. Specify  |        |
| 4.6   | Commonwealth Financial   | Last 4 digits of account number 86N1  | \$1.00 |
|       | Nonpriority Creditor's Name<br>245 Main St<br>Scranton, PA 18519                         | When was the debt incurred?   |        |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                     | As of the date you file, the claim is: Check all that apply   |        |
|       | ■ Debtor 1 only  | ☐ Contingent  |        |
|       | Debtor 2 only  | ☐ Unliquidated  |        |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed  |        |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |        |
|       | ☐ Check if this claim is for a community   | ☐ Student loans   |        |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |        |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |        |
|       | Yes  | Other. Specify  |        |
| 4.7   | Commonwealth Financial   | Last 4 digits of account number 45N1  | \$1.00 |
|       | Nonpriority Creditor's Name<br>245 Main St<br>Scranton, PA 18519                         | When was the debt incurred?   |        |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                      | As of the date you file, the claim is: Check all that apply   |        |
|       | ■ Debtor 1 only  | ☐ Contingent  |        |
|       | Debtor 2 only  | □ Unliquidated  |        |
|       | Debtor 1 and Debtor 2 only   | □ Disputed  |        |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |        |
|       | ☐ Check if this claim is for a community   | ☐ Student loans   |        |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |        |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |        |
|       | □Yes   | Other. Specify  |        |
|       | , , ,  | — Outer, Specify  |        |

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| Debto | or 1 Toshira Myles  | Case number (if know)   |             |
|-------|---|---|-------------|
| 4.8   | Credit Collection Services Nonpriority Creditor's Name  | Last 4 digits of account number 6276  | \$1.00      |
|       | PO BOX 9136   | When was the debt incurred?   |             |
|       | Needham Heights, MA 02494  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |             |
|       | _   |   |             |
|       | Debtor 1 only   | ☐ Contingent  |             |
|       | Debtor 2 only   | ☐ Unliquidated  |             |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |             |
|       | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  ☐ Student loans   |             |
|       | ☐ Check if this claim is for a community debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |
|       | Is the claim subject to offset?   | report as priority claims   |             |
|       | ■ No<br>□ Yes   | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify                      |             |
|       |   | Other. Specify  |             |
| 4.9   | Debt Recovery Solutions, LLC Nonpriority Creditor's Name  | Last 4 digits of account number 4628  | \$1.00      |
|       | 900 Merchants Concourse, Suite 106<br>Westbury, NY 11590  | When was the debt incurred?   |             |
|       | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |             |
|       | Who incurred the debt? Check one.   | ,   |             |
|       | Debtor 1 only   | ☐ Contingent  |             |
|       | ☐ Debtor 2 only   | ☐ Unliquidated  |             |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |             |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |             |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |             |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|       | □Yes  | Other. Specify  |             |
| 4.1   | Dept of Ed/Sallie Mae   | Last 4 digits of account number 1011  | \$36,845.00 |
| 0     | Nonpriority Creditor's Name   | Last 4 digits of account number 1011  | ψ30,043.00  |
|       | 11100 Usa Pkwy<br>Fishers, IN 46037   | When was the debt incurred?   |             |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                             | As of the date you file, the claim is: Check all that apply   |             |
|       | Debtor 1 only   | ☐ Contingent  |             |
|       | Debtor 2 only   | ☐ Unliquidated  |             |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |             |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |             |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |             |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |             |
|       | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |             |
|       | Yes   | ■ Other. Specify  |             |

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| Debtor | 1 Toshira Myles  | Case number (if know)   |                                       |
|--------|--|---|---------------------------------------|
| 4.1    | Dept of Ed/Sallie Mae  | Last 4 digits of account number 1123  | \$5,790.00                            |
|        | Nonpriority Creditor's Name<br>11100 Usa Pkwy<br>Fishers, IN 46037 | When was the debt incurred?   |                                       |
|        | Number Street City State Zlp Code                                  | As of the date you file, the claim is: Check all that apply   |                                       |
|        | Who incurred the debt? Check one.                                  |   |                                       |
|        | ■ Debtor 1 only  | ☐ Contingent  |                                       |
|        | ☐ Debtor 2 only  | ☐ Unliquidated  |                                       |
|        | ☐ Debtor 1 and Debtor 2 only                                       | Disputed  |                                       |
|        | At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |                                       |
|        | Check if this claim is for a community debt                        | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not           |                                       |
|        | Is the claim subject to offset?                                    | report as priority claims   |                                       |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |                                       |
|        | ☐ Yes  | Other. Specify  |                                       |
| 4.1    | Dept of Ed/Sallie Mae  | Last 4 digits of account number 0123  | \$4,157.00                            |
|        | Nonpriority Creditor's Name  | <del></del>   | · · · · · · · · · · · · · · · · · · · |
|        | 11100 Usa Pkwy<br>Fishers, IN 46037                                | When was the debt incurred?   |                                       |
|        | Number Street City State Zlp Code                                  | As of the date you file, the claim is: Check all that apply   |                                       |
|        | Who incurred the debt? Check one.                                  |   |                                       |
|        | ■ Debtor 1 only  | ☐ Contingent  |                                       |
|        | ☐ Debtor 2 only  | ☐ Unliquidated  |                                       |
|        | ☐ Debtor 1 and Debtor 2 only                                       | ☐ Disputed  |                                       |
|        | ☐ At least one of the debtors and another                          | Type of NONPRIORITY unsecured claim:  |                                       |
|        | Check if this claim is for a community                             | Student loans   |                                       |
|        | debt Is the claim subject to offset?                               | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                                       |
|        | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |                                       |
|        | Yes  | Other. Specify  |                                       |
| 4.1    |  |   |                                       |
| 3      | Dept of Ed/Sallie Mae  | Last 4 digits of account number   | \$3,894.00                            |
|        | Nonpriority Creditor's Name<br>11100 Usa Pkwy<br>Fishers, IN 46037 | When was the debt incurred?   |                                       |
|        | Number Street City State Zlp Code                                  | As of the date you file, the claim is: Check all that apply   |                                       |
|        | Who incurred the debt? Check one.                                  |   |                                       |
|        | ■ Debtor 1 only  | ☐ Contingent  |                                       |
|        | Debtor 2 only  | ☐ Unliquidated  |                                       |
|        | Debtor 1 and Debtor 2 only   | Disputed  |                                       |
|        | At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |                                       |
|        | ☐ Check if this claim is for a community debt                      | Student loans   |                                       |
|        | Is the claim subject to offset?                                    | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                                       |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |                                       |
|        | □Yes   | Other. Specify  |                                       |

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| Debto    | or 1 Toshira Myles   | Case number (if know)  |             |
|----------|--|--|-------------|
| 4.1      |  |  |             |
| 4        | Dept of Ed/Sallie Mae  | Last 4 digits of account number 0922   | \$3,811.00  |
|          | Nonpriority Creditor's Name<br>11100 Usa Pkwy                        | When was the debt incurred?  |             |
|          | Fishers, IN 46037  |  |             |
|          | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply  |             |
|          | Who incurred the debt? Check one.                                    |  |             |
|          | ■ Debtor 1 only  | ☐ Contingent   |             |
|          | Debtor 2 only  | ☐ Unliquidated   |             |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans  |             |
|          | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |             |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | □ Yes  |  |             |
|          | i res  | Other. Specify   |             |
|          |  |  |             |
| 4.1<br>5 | Dept of Ed/Sallie Mae  | Last 4 digits of account number 0506   | \$2,832.00  |
|          | Nonpriority Creditor's Name  | <del></del>  |             |
|          | 11100 Usa Pkwy   | When was the debt incurred?  |             |
|          | Fishers, IN 46037  Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply  |             |
|          | Who incurred the debt? Check one.                                    |  |             |
|          | ■ Debtor 1 only  | ☐ Contingent   |             |
|          | ☐ Debtor 2 only  | ☐ Unliquidated   |             |
|          | ☐ Debtor 1 and Debtor 2 only   | □ Disputed   |             |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans  |             |
|          | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not  |             |
|          | Is the claim subject to offset?                                      | report as priority claims  |             |
|          | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | Yes  | Other. Specify   |             |
|          |  | · · ·  |             |
| 4.1      | Dept of Ed/Sallie Mae  | Last 4 digits of account number 0722   | \$2,797.00  |
| 6        | Nonpriority Creditor's Name  |  | ψ2,7 07 100 |
|          | 11100 Úsa Pkwy   | When was the debt incurred?  |             |
|          | Fishers, IN 46037  | - Accepted to the configuration of the state |             |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |             |
|          |  |  |             |
|          | Debtor 1 only  | ☐ Contingent   |             |
|          | Debtor 2 only  | ☐ Unliquidated   |             |
|          | ☐ Debtor 1 and Debtor 2 only   | Disputed   |             |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community debt                        | Student loans  |             |
|          | Is the claim subject to offset?                                      | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims   |             |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | □ Yes  | _  |             |
|          | □ res  | Other. Specify   |             |

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| Debtoi       | r 1 Toshira Myles   | Case number (if know)   |            |
|--------------|---|---|------------|
| Jeptol 4.1 7 | Dept of Ed/Sallie Mae  Nonpriority Creditor's Name 11100 Usa Pkwy Fishers, IN 46037  Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes | Case number (if know)  Last 4 digits of account number  0506  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify | \$1,947.00 |
| 4.1          | Dept of Ed/Sallie Mae  Nonpriority Creditor's Name 11100 Usa Pkwy Fishers, IN 46037  Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only  | Last 4 digits of account number 0722  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  | \$1,920.00 |
|              | □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes   | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify   |            |
| 4.1          | Dept of Ed/Sallie Mae  Nonpriority Creditor's Name 11100 Usa Pkwy Fishers, IN 46037  Number Street City State Zlp Code  Who incurred the debt? Check one.   | Last 4 digits of account number 0922  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  | \$807.00   |
|              | ■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes  | □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify   |            |

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| Debt     | or 1 Toshira Myles   | Case number (if know)   |          |
|----------|--|---|----------|
| 4.2<br>0 | Dept of Ed/Sallie Mae  | Last 4 digits of account number 0123  | \$806.00 |
|          | Nonpriority Creditor's Name<br>11100 Usa Pkwy<br>Fishers, IN 46037   | When was the debt incurred?   |          |
|          | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply   |          |
|          | Who incurred the debt? Check one.                                    |   |          |
|          | ■ Debtor 1 only  | ☐ Contingent  |          |
|          | Debtor 2 only  | ☐ Unliquidated  |          |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |          |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |          |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |          |
|          | debt Is the claim subject to offset?                                 | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |          |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |          |
|          | ☐ Yes  | Other. Specify  |          |
| 4.2<br>1 | Dept of Ed/Sallie Mae  | Last 4 digits of account number 0514  | \$631.00 |
|          | Nonpriority Creditor's Name<br>11100 Usa Pkwy<br>Fishers, IN 46037   | When was the debt incurred?   |          |
|          | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply   |          |
|          | Who incurred the debt? Check one.                                    |   |          |
|          | ■ Debtor 1 only  | ☐ Contingent  |          |
|          | ☐ Debtor 2 only  | ☐ Unliquidated  |          |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed  |          |
|          | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:  |          |
|          | $\square$ Check if this claim is for a community                     | Student loans   |          |
|          | debt Is the claim subject to offset?                                 | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |          |
|          | No   | □ Debts to pension or profit-sharing plans, and other similar debts                                       |          |
|          | ■ No □ Yes   |   |          |
|          | Li Yes   | Other. Specify  |          |
| 4.2<br>2 | Eastern Account System   | Last 4 digits of account number 8312  | \$1.00   |
|          | Nonpriority Creditor's Name 75 Glen Rd, Ste 119 Sandy Hook, CT 06482 | When was the debt incurred?   |          |
|          | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply   |          |
|          | Who incurred the debt? Check one.                                    |   |          |
|          | ■ Debtor 1 only  | ☐ Contingent  |          |
|          | Debtor 2 only  | ☐ Unliquidated  |          |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |          |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |          |
|          | ☐ Check if this claim is for a community                             | Student loans   |          |
|          | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |          |
|          | ☐ Yes  | Other. Specify  |          |
|          |  |   |          |

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Case number (if know)

| 4.2<br>3 | Eastern Account System   | Last 4 digits of account number 7583   | \$1.00                                |
|----------|--|--|---------------------------------------|
| 3        | Nonpriority Creditor's Name  | When was the debt incurred?  | *****                                 |
|          | 75 Glen Rd, Ste 119<br>Sandy Hook, CT 06482                          | when was the debt incurred?  |                                       |
|          | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply  |                                       |
|          | Who incurred the debt? Check one.                                    | •  |                                       |
|          | ■ Debtor 1 only  | ☐ Contingent   |                                       |
|          | Debtor 2 only  | ☐ Unliquidated   |                                       |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |                                       |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |                                       |
|          |  | ☐ Student loans  |                                       |
|          | ☐ Check if this claim is for a community debt                        | ☐ Obligations arising out of a separation agreement or divorce that you did not                          |                                       |
|          | Is the claim subject to offset?                                      | report as priority claims  |                                       |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                      |                                       |
|          | Yes  | Other. Specify   |                                       |
| 4.2<br>4 | First Premier Bank   | Last 4 digits of account number 6402   | \$418.75                              |
|          | Nonpriority Creditor's Name  | <del></del>  |                                       |
|          | 601 S. Minnesota   | When was the debt incurred?  |                                       |
|          | Sioux Falls, SD 57104  Number Street City State Zlp Code             | As of the date you file the claim is. Check all that apply   |                                       |
|          | Who incurred the debt? Check one.                                    | As of the date you file, the claim is: Check all that apply  |                                       |
|          | <u> </u>   |  |                                       |
|          | ■ Debtor 1 only  | Contingent   |                                       |
|          | Debtor 2 only  | Unliquidated   |                                       |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |                                       |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:   |                                       |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans  |                                       |
|          | debt   | Obligations arising out of a separation agreement or divorce that you did not                            |                                       |
|          | Is the claim subject to offset?                                      | report as priority claims  |                                       |
|          | No   | Debts to pension or profit-sharing plans, and other similar debts  |                                       |
|          | ☐ Yes  | Other. Specify   |                                       |
| 4.2<br>5 | General Revenue Corp   | Last 4 digits of account number 4879   | \$1.00                                |
|          | Nonpriority Creditor's Name  |  | · · · · · · · · · · · · · · · · · · · |
|          | 1501 Northlake Dr.   | When was the debt incurred?  |                                       |
|          | Cincinnati, OH 45249   | As of the data you file the plain in Observable II that are by   |                                       |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |                                       |
|          | <u> </u>   |  |                                       |
|          | Debtor 1 only  | Contingent   |                                       |
|          | Debtor 2 only  | Unliquidated   |                                       |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |                                       |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |                                       |
|          | Check if this claim is for a community                               | Student loans  |                                       |
|          | debt Is the claim subject to offset?                                 | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |                                       |
|          |  | □ Debts to pension or profit-sharing plans, and other similar debts                                      |                                       |
|          | No   | _  |                                       |
|          | Yes  | Other. Specify   |                                       |

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| l osnira iviyles   | Case number (if know)   |            |
|--|---|------------|
| Midland Funding  | Last 4 digits of account number 5478  | \$1.00     |
| Nonpriority Creditor's Name<br>8875 Aero Dr STE 200      | When was the debt incurred?   |            |
| San Diego, CA 92123<br>Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                        | , to or the date you may the stalling of some and that apply  |            |
| ■ Debtor 1 only  | ☐ Contingent  |            |
| ☐ Debtor 2 only  | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only                             | ☐ Disputed  |            |
| ☐ At least one of the debtors and another                | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community                 | ☐ Student loans   |            |
| debt Is the claim subject to offset?                     | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |
| Yes  | Other. Specify  |            |
| National Louis University                                | Last 4 digits of account number   | \$5,941.00 |
| Nonpriority Creditor's Name 120 South Michigan Ave       | When was the debt incurred?   |            |
| Chicago, IL 60603  Number Street City State Zlp Code     | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                        | • • • • • • • • • • • • • • • • • • •   |            |
| Debtor 1 only  | ☐ Contingent  |            |
| Debtor 2 only  | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only                             | ☐ Disputed  |            |
| At least one of the debtors and another                  | Type of NONPRIORITY unsecured claim:  |            |
| Check if this claim is for a community                   | ☐ Student loans   |            |
| debt<br>Is the claim subject to offset?                  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |
| Yes  | ■ Other. Specify  |            |
| People's Gas Light & Coke                                | Last 4 digits of account number 2196  | \$1,982.74 |
| Nonpriority Creditor's Name 200 E Randolph St Ste 20     | Last 4 digits of account number 2196  When was the debt incurred?   | ψ1,902.74  |
| Chicago, IL 60601  |   |            |
| Number Street City State Zlp Code                        | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                        | _   |            |
| Debtor 1 only  | Contingent  |            |
| Debtor 2 only  | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only                               | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |            |
| At least one of the debtors and another                  | Student loans   |            |
| ☐ Check if this claim is for a community debt            | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |
| Is the claim subject to offset?                          | report as priority claims   |            |
| ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |
| □Yes   | ■ Other. Specify  |            |

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Case number (if know)

| Debtor   | 1 Toshira Myles  | Case number (if know)  |               |
|----------|--|--|---------------|
| 4.2      | Papple's Coal ight & Coke                              |  | ¢075 00       |
| 9        | People's Gas Light & Coke  Nonpriority Creditor's Name | Last 4 digits of account number 0001   | \$875.00      |
|          | 200 E Randolph St                                      | When was the debt incurred?  |               |
|          | Chicago, IL 60601                                      |  |               |
|          | Number Street City State Zlp Code                      | As of the date you file, the claim is: Check all that apply  |               |
|          | Who incurred the debt? Check one.                      |  |               |
|          | ■ Debtor 1 only  | ☐ Contingent   |               |
|          | Debtor 2 only  | ☐ Unliquidated   |               |
|          | Debtor 1 and Debtor 2 only                             | ☐ Disputed   |               |
|          | ☐ At least one of the debtors and another              | Type of NONPRIORITY unsecured claim:   |               |
|          | ☐ Check if this claim is for a community               | ☐ Student loans  |               |
|          | debt Is the claim subject to offset?                   | Dbligations arising out of a separation agreement or divorce that you did not report as priority claims  |               |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |               |
|          | ☐ Yes  |  |               |
|          | Tes  | Other. Specify   |               |
| 42       |  |  |               |
| 4.3<br>0 | US Bank  | Last 4 digits of account number 5020   | \$1.00        |
|          | Nonpriority Creditor's Name                            |  |               |
|          | P.O. Box 790084<br>Saint Louis, MO 63179               | When was the debt incurred?  |               |
|          | Number Street City State Zlp Code                      | As of the date you file, the claim is: Check all that apply  |               |
|          | Who incurred the debt? Check one.                      | The state of the s |               |
|          | ■ Debtor 1 only  | ☐ Contingent   |               |
|          | Debtor 2 only  | ☐ Unliquidated   |               |
|          | Debtor 1 and Debtor 2 only                             | ☐ Disputed   |               |
|          |  | Type of NONPRIORITY unsecured claim:   |               |
|          | At least one of the debtors and another                | Student loans  |               |
|          | ☐ Check if this claim is for a community debt          | ☐ Obligations arising out of a separation agreement or divorce that you did not  |               |
|          | Is the claim subject to offset?                        | report as priority claims  |               |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts  |               |
|          | ☐ Yes  | Other. Specify   |               |
|          |  |  |               |
| 4.3      | Nr. 0 : 0  | 4500   | <b>#</b> 4.00 |
| 1        | Virtuoso Sourcing Group  Nonpriority Creditor's Name   | Last 4 digits of account number 1593   | \$1.00        |
|          | 4500 E Cherry Creek South                              | When was the debt incurred?  |               |
|          | Denver, CO 80246  Number Street City State Zlp Code    | As of the date you file, the claim is: Check all that apply  |               |
|          | Who incurred the debt? Check one.                      | no or and date you me, and channel or or other and date approp   |               |
|          | ■ Debtor 1 only  | ☐ Contingent   |               |
|          | Debtor 2 only  | ☐ Unliquidated   |               |
|          |  |  |               |
|          | Debtor 1 and Debtor 2 only                             | ☐ Disputed  Type of NONPRIORITY unsecured claim:   |               |
|          | At least one of the debtors and another                | Student loans  |               |
|          | ☐ Check if this claim is for a community debt          |  |               |
|          | Is the claim subject to offset?                        | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |               |
|          | ■ No   | □ Debts to pension or profit-sharing plans, and other similar debts  |               |
|          | ☐ Yes  | _  |               |
|          | LI TES   | Other. Specify   |               |

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

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| Debtor 1 Toshira Myles                      | Document Page                            | 29 of 59<br>Case number (if know)                     |
|---|--|---|
| Arnold Scott Harris, P.C.                   | Line 4.2 of (Check one):                 | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| 111 W Jackson Blvd, Suite 600               |  | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago, IL 60604                           | Last 4 digits of account number          |   |
| Name and Address                            | On which entry in Part 1 or Part 2 did y | ou list the original creditor?                        |
| Chicago Department of Revenue               | Line 4.2 of (Check one):                 | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| 121 N. Lasalle Street<br>Room 107A          |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Chicago, IL 60602                           | Last 4 digits of account number          |   |
| Name and Address                            | On which entry in Part 1 or Part 2 did y |   |
| Goldman and Grant<br>205 W Randolph         | Line 4.2 of (Check one):                 | Part 1: Creditors with Priority Unsecured Claims      |
| Chicago, IL 60606                           |  | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
|   | Last 4 digits of account number          |   |
| Name and Address                            | On which entry in Part 1 or Part 2 did y |   |
| Harris & Harris<br>600 W. Jackson Blvd #400 | Line <u>4.2</u> of ( <i>Check one</i> ): | Part 1: Creditors with Priority Unsecured Claims      |
| Chicago, IL 60661                           |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
| <b>3</b> /                                  | Last 4 digits of account number          |   |
| Name and Address                            | On which entry in Part 1 or Part 2 did y | ou list the original creditor?                        |
| Jefferson Capital Systems LLC               | Line 4.24 of (Check one):                | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| P.O. Box 772813<br>Chicago, IL 60677        |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
|   | Last 4 digits of account number          |   |
| Name and Address                            | On which entry in Part 1 or Part 2 did y |   |
| National Louis University                   | Line 4.27 of (Check one):                | Part 1: Creditors with Priority Unsecured Claims      |
| Student Finance Office<br>1000 Capitol Dr   |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Wheeling, IL 60090                          |  |   |
|   | Last 4 digits of account number          |   |
| Name and Address                            | On which entry in Part 1 or Part 2 did y | _   |
| Secretary of State<br>Compliance Dept       | Line 4.2 of (Check one):                 | Part 1: Creditors with Priority Unsecured Claims      |
| 2701 S Dirksen Pkwy                         |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Springfield, IL 62723                       | Look 4 digits of account number-         |   |
|   | Last 4 digits of account number          |   |

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim     |
|--------------|-----|---|-----|-----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|              |     |   |     | Total Claim     |
|              | 6f. | Student loans   | 6f. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>78,799.63 |

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Total Nonpriority. Add lines 6f through 6i.

6j. 78,799.63

|                          |                          | III FAUE 3 F UL 33   |  |
|--------------------------|--------------------------|--|--|
| mation to identify your  | case:                    |  |  |
| Toshira Myles            |                          |  |  |
| First Name               | Middle Name              | Last Name  |  |
|                          |                          |  |  |
| First Name               | Middle Name              | Last Name  |  |
| ankruptcy Court for the: | NORTHERN DISTRICT        | OF ILLINOIS  |  |
|                          |                          |  | ☐ Check if this is   |
|                          | Toshira Myles First Name | Toshira Myles First Name Middle Name  First Name Middle Name | Toshira Myles First Name Middle Name Last Name  First Name Middle Name Last Name |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | n whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.2 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | <del>_</del>                            |
| 2.3 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.4 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.5 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   |   |
|     | City      |              | State   | ZIP Code          | _                                       |
|     | •         |              |   |                   |   |

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|   |  | <u> </u>  | III Paue 37 t  | <u> </u>  |         |
|---|--|---|--|---|---------|
| Fill in this  | information to identify your   |   |  |   |         |
| Debtor 1  | Toshira Myles  |   |  |   |         |
|   | First Name   | Middle Name   | Last Name  |   |         |
| Debtor 2<br>(Spouse if, filing                              | g) First Name  | Middle Name   | Last Name  |   |         |
| United Stat   | es Bankruptcy Court for the:   | NORTHERN DISTRICT   | OF ILLINOIS  |   |         |
| Officed Stat  | es bankruptcy Court for the.   | NORTHERN DISTRICT   | OI ILLINOIS  |   |         |
| Case numb   | per  |   |  | ☐ Check if this is an                                 |         |
|   |  |   |  | amended filing  |         |
| Ott: -: - I   | Town 10011   |   |  |   |         |
|   | Form 106H  | -1-4  |  |   |         |
| Schea   | ule H: Your Cod  | eptors  |  | 12/   | 15      |
| No Yes  2. With Arizona  No. Yes.  3. In Coluin line Form 1 | a, California, Idaho, Louisiana. Go to line 3. Did your spouse, former spoumn 1, list all of your codebt 2 again as a codebtor only in 106D), Schedule E/F (Official | I lived in a community pr<br>Nevada, New Mexico, Pu<br>use, or legal equivalent live<br>ors. Do not include your<br>f that person is a guaran | operty state or territor erto Rico, Texas, Washi with you at the time?  spouse as a codebtor tor or cosigner. Make | y? (Community property states and territories include | fficial |
|   | lumn 2.  |   |  | Column 2: The creditor to whom you owe the d          | leht    |
|   | lame, Number, Street, City, State and Z  | P Code  |  | Check all schedules that apply:                       |         |
| 3.1   |  |   |  | ☐ Schedule D. line                                    |         |
|   | Name   |   |  | ☐ Schedule E/F, line                                  |         |
|   |  |   |  | ☐ Schedule G, line                                    |         |
|   | Number Street  |   |  | _   |         |
| (   | City   | State   | ZIP Code   |   |         |
| 22  |  |   |  | Cahadula D. lina                                      |         |
| 3.2   | Name   |   |  | □ Schedule D, line<br>□ Schedule E/F, line            |         |
|   |  |   |  | ☐ Schedule G, line                                    |         |
| <u> </u>  | Number Street  |   |  | _   |         |
| C   | City   | State   | ZIP Code   |   |         |

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| Fill               | in this information to identify your o  | ase:                          |   |                       |                 |  |                           |                                  |                 |
|--------------------|---|-------------------------------|---|-----------------------|-----------------|--|---------------------------|----------------------------------|-----------------|
| Del                | btor 1 Toshira Myle   | es .                          |   |                       | _               |  |                           |                                  |                 |
|                    | btor 2<br>puse, if filing)  |                               |   |                       | _               |  |                           |                                  |                 |
| Uni                | ited States Bankruptcy Court for the  | : NORTHERN DISTRIC            | CT OF ILLINOIS  |                       |                 |  |                           |                                  |                 |
|                    | se number<br>nown)  |                               | -   |                       |                 | Check if this is  An amended  A supplement 13 income | ed filing<br>ent showing  | g postpetition<br>ollowing date: | chapter         |
| 0                  | fficial Form 106I   |                               |   |                       |                 | MM / DD/ \   | YYY                       |                                  |                 |
| S                  | chedule I: Your Inc   | ome                           |   |                       |                 |  |                           |                                  | 12/15           |
| sup<br>spo<br>atta | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wi | ng jointly, and your ith you, do not inclu              | spouse i<br>de inforr | s livi<br>natio | ng with you, incl<br>on about your spo               | ude inforn<br>ouse. If mo | nation about<br>ore space is     | your<br>needed, |
| 1.                 | Fill in your employment information.  |                               | Debtor 1  |                       |                 | Debtor 2   | or non-fil                | ling spouse                      |                 |
|                    | If you have more than one job,  | Employment status             | ■ Employed  | ☐ Empl                | ☐ Employed      |  |                           |                                  |                 |
|                    | attach a separate page with information about additional  | Employment status             | ☐ Not employed  |                       |                 | ☐ Not e  | ☐ Not employed            |                                  |                 |
|                    | employers.  | Occupation                    | secretary   |                       |                 |  |                           |                                  |                 |
|                    | Include part-time, seasonal, or self-employed work.   | Employer's name               | Advocate Health   | Care                  |                 |  |                           |                                  |                 |
|                    | Occupation may include student or homemaker, if it applies.   | Employer's address            | Attn Payroll Man<br>2025 Windsor Di<br>Oak Brook, IL 60 | •                     |                 |  |                           |                                  |                 |
|                    |   | How long employed to          | here? 2 yrs   |                       |                 |  |                           |                                  |                 |
| Pai                | rt 2: Give Details About Mo   | nthly Income                  |   |                       |                 |  |                           |                                  |                 |
|                    | mate monthly income as of the duse unless you are separated.  | ate you file this form. If    | you have nothing to r                                   | eport for a           | any I           | ne, write \$0 in the                                 | space. Inc                | clude your noi                   | n-filing        |
|                    | ou or your non-filing spouse have m<br>e space, attach a separate sheet to  |                               | ombine the informatio                                   | n for all e           | mplo            | yers for that perso                                  | on on the lir             | nes below. If y                  | you need        |
|                    |   |                               |   |                       |                 | For Debtor 1   |                           | otor 2 or<br>ng spouse           |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,  |                               |   | 2.                    | \$              | 2,061.87   | \$                        | N/A                              |                 |
| 3.                 | Estimate and list monthly over  | time pay.                     |   | 3.                    | +\$             | 0.00   | +\$                       | N/A                              |                 |
| 4.                 | Calculate gross Income. Add li  | ne 2 + line 3.                |   | 4.                    | \$              | 2,061.87   | \$                        | N/A_                             |                 |

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| Debto | or 1                  | Toshira Myles   |  |     | Case n | umber (if kn | own) |           |                     |             |          |
|-------|-----------------------|---|--|-----|--------|--------------|------|-----------|---------------------|-------------|----------|
|       |                       |   |  |     | For I  | Debtor 1     |      |           | Debtor<br>-filing s |             |          |
|       | Cop                   | by line 4 here  | 4.   |     | \$     | 2,061        | .87  | \$        |                     | N/A         |          |
| 5.    | List                  | all payroll deductions:   |  |     |        |              |      |           |                     |             |          |
|       | 5a.                   | Tax, Medicare, and Social Security deductions   | 5a   | ١.  | \$     | 221          | 50   | \$        |                     | N/A         |          |
|       | 5b.                   | Mandatory contributions for retirement plans  | 5b   |     | \$     |              | .84  | \$_       |                     | N/A         |          |
|       | 5c.                   | Voluntary contributions for retirement plans  | 5c.  |     | \$     |              | .00  | \$        |                     | N/A         |          |
|       | 5d.                   | Required repayments of retirement fund loans  | 5d   | ١.  | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 5e.                   | Insurance   | 5e   | ١.  | \$     | 402          | .00  | \$        |                     | N/A         |          |
|       | 5f.                   | Domestic support obligations  | 5f.  |     | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 5g.                   | Union dues  | 5g   |     | \$     |              | .00  | \$        |                     | N/A         |          |
|       | 5h.                   | Other deductions. Specify:  | 5h   | 1.+ | \$     | 0            | .00  | + \$_     |                     | N/A         |          |
| 6.    | Add                   | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+  | 5g+5h. 6.  |     | \$     | 685          | .34  | \$        |                     | N/A         |          |
| 7.    | Cal                   | culate total monthly take-home pay. Subtract line 6 from  | line 4. 7.   |     | \$     | 1,376        | .53  | \$        |                     | N/A         |          |
| 8.    | List<br>8a.           | all other income regularly received:  Net income from rental property and from operating a profession, or farm  Attach a statement for each property and business showi receipts, ordinary and necessary business expenses, and monthly net income. | ng gross<br>d the total                            |     | \$     |              | .00  | ¢         |                     | NI/A        |          |
|       | 8b.                   | Interest and dividends  | 8a<br>8b   |     | \$<br> |              | .00  | \$_<br>\$ |                     | N/A         |          |
|       | 8c.                   | Family support payments that you, a non-filing spous  |  |     | Ψ      |              | .00  | Ψ_        |                     | N/A         |          |
|       |                       | regularly receive Include alimony, spousal support, child support, maintena settlement, and property settlement.  | -  |     | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 8d.                   | Unemployment compensation   | 8d   | ١.  | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 8e.                   | Social Security   | 8e   | ٠.  | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 8f.                   | Other government assistance that you regularly receinclude cash assistance and the value (if known) of any rethat you receive, such as food stamps (benefits under the Nutrition Assistance Program) or housing subsidies. Specify:                 | on-cash assistance                                 |     | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 8g.                   | Pension or retirement income  | 8g   | ١.  | \$     | 0            | .00  | \$        |                     | N/A         |          |
|       | 8h.                   | Other monthly income. Specify: Estimated future ta averaged over 12 r   |  | 1.+ | \$     | 501          | .00  | + \$      |                     | N/A         |          |
| 9.    | Add                   | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.   |     | \$     | 501          | .00  | \$        |                     | N/A         |          |
|       |                       | culate monthly income. Add line 7 + line 9.   |  | \$_ | 1      | ,877.53      | + \$ |           | N/A                 | = \$        | 1,877.53 |
|       |                       | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing  | · ·  |     |        |              |      |           |                     |             |          |
|       | Incli<br>othe<br>Do i | te all other regular contributions to the expenses that you do contributions from an unmarried partner, members of your friends or relatives.  not include any amounts already included in lines 2-10 or arecify:                                   | our household, your dependents that are not availa |     |        | •            |      |           |                     | e J.<br>+\$ | 0.00     |
|       |                       | If the amount in the last column of line 10 to the amount the that amount on the Summary of Schedules and Statistical lies  |  |     |        |              |      |           | . 12.               | \$          | 1,877.53 |
| 13.   |                       | you expect an increase or decrease within the year after  | r you file this form?                              |     |        |              |      |           |                     |             | income   |
|       |                       | Yes. Explain:   |  |     |        |              |      |           |                     |             |          |

Official Form 106I Schedule I: Your Income page 2

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| E-HII             | in this informat                                   | ion to identify ye   |                                     |   |   | 1           |             |                       |                               |
|-------------------|--|--|-------------------------------------|---|---|-------------|-------------|-----------------------|-------------------------------|
|                   | in this informat                                   | ion to identify yo   | our case.                           |   |   |             |             |                       |                               |
| Deb               | otor 1   | Toshira Myles  | 3                                   |   |   | Ch<br>□     | eck if this | s is:<br>ended filing |                               |
| Deb               | otor 2   |  |                                     |   |   |             | A supp      | lement show           | ing postpetition chapter      |
| (Sp               | ouse, if filing)                                   |  |                                     |   |   |             | 13 exp      | enses as of           | the following date:           |
| Unit              | ted States Bankru                                  | uptcy Court for the:   | NORTH                               | ERN DISTRICT OF ILLIN   | OIS                                     |             | MM / D      | DD / YYYY             |                               |
| 1                 | se number  |  |                                     |   |   |             |             |                       |                               |
| (If k             | nown)  |  |                                     |   |   |             |             |                       |                               |
| 0                 | fficial Fo   | rm 106J  |                                     |   |   |             |             |                       |                               |
| S                 | chedule  | J: Your I  | Exper                               | ises  |   |             |             |                       | 12/1                          |
| Be<br>info<br>nur | as complete a<br>ormation. If mo<br>mber (if knowr | ind accurate as  | possible<br>eded, atta<br>y questio | If two married people ar<br>ch another sheet to this                      |   |             |             |                       |                               |
| Par<br>1.         | Is this a join                                     |  | noia                                |   |   |             |             |                       |                               |
|                   | ■ No. Go to  |  |                                     |   |   |             |             |                       |                               |
|                   | _  |  | n a separ                           | ate household?  |   |             |             |                       |                               |
|                   | □ No   | )  | •                                   |   |   |             |             |                       |                               |
|                   |  |  | st file Offici                      | al Form 106J-2, Expenses  | for Separate House                      | ehold of De | ebtor 2.    |                       |                               |
| 2.                | Do you have  | dependents?  | Пы                                  |   |   |             |             |                       |                               |
| ۷.                | •  | •  | ☐ No                                |   |   |             | _           |                       |                               |
|                   | Do not list De Debtor 2.                           | ebtor 1 and  | Yes.                                | Fill out this information for each dependent                              | Dependent's relati<br>Debtor 1 or Debto |             | age         | pendent's             | Does dependent live with you? |
|                   | Do not state t                                     | the  |                                     |   |   |             |             |                       | □ No                          |
|                   | dependents r                                       | names.   |                                     |   | Son                                     |             | 2           |                       | Yes                           |
|                   |  |  |                                     |   |   |             | _           |                       | □ No                          |
|                   |  |  |                                     |   | Daughter                                |             | 2           |                       | Yes                           |
|                   |  |  |                                     |   | 5                                       |             |             |                       | □ No                          |
|                   |  |  |                                     |   | Daughter                                |             |             |                       | Yes                           |
|                   |  |  |                                     |   |   |             |             |                       | □ No                          |
| 3.                | Do your eyn  | enses include  | _                                   |   |   |             |             |                       | ☐ Yes                         |
| Э.                | expenses of  | people other the people other the people other the people other the people of the peop | han $_{f \Box}$                     | No<br>Yes   |   |             |             |                       |                               |
| Est               | imate your ex                                      |  | our bankrı                          | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |   |             |             |                       |                               |
| the               |  | assistance and   |                                     | government assistance i<br>cluded it on <i>Schedule I:</i> )              |   |             |             | Your expe             | enses                         |
| 4.                |  | r home owners<br>d any rent for the  |                                     | ses for your residence. I   | nclude first mortgag                    | e 4.        | \$          |                       | 300.00                        |
|                   | If not include                                     | ed in line 4:  |                                     |   |   |             |             |                       |                               |
|                   | 4a. Real e   | state taxes  |                                     |   |   | 4a.         | \$          |                       | 0.00                          |
|                   | 4b. Proper   | ty, homeowner's  | s, or renter                        | 's insurance  |   | 4b.         | \$          |                       | 0.00                          |
|                   |  |  |                                     | ıpkeep expenses   |   | 4c.         | ·           |                       | 0.00                          |
| _                 |  | owner's associat   |                                     |   | and a south of                          | 4d.<br>5.   |             |                       | 0.00                          |
| 5.                | ADDITIONAL M                                       | iortgage navme   | ents for vo                         | <b>our residence</b> , such as ho   | me equity loans                         | 5           | .Th         |                       | 0.00                          |

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| Deb | otor 1  | Toshira N    | Лyles  | Case no                               | umb        | per (if known)    |                                       |
|-----|---------|--------------|--|---------------------------------------|------------|-------------------|---------------------------------------|
| 6.  | Utiliti | ies:         |  |                                       |            |                   |                                       |
| 0.  | 6a.     |              | heat, natural gas  | 6                                     | a.         | \$                | 200.00                                |
|     | 6b.     | -            | wer, garbage collection  |                                       |            | \$                | 0.00                                  |
|     | 6c.     |              | e, cell phone, Internet, satellite, and cable se                                   | ervices 6                             | Sc.        | \$                | 110.00                                |
|     | 6d.     | Other. Spe   |  |                                       | id.        | \$                | 0.00                                  |
| 7.  |         |              | ekeeping supplies  |                                       | 7.         | \$                | 522.53                                |
| 8.  |         |              | hildren's education costs  |                                       | 8.         | \$                | 30.00                                 |
| 9.  |         |              | ry, and dry cleaning   |                                       | 9.         | \$                | 50.00                                 |
|     |         | •            | products and services  |                                       | 0.         | \$                | 50.00                                 |
|     |         | -            | ntal expenses  |                                       | 1.         | ·                 | 100.00                                |
|     |         |              | Include gas, maintenance, bus or train fare  |                                       |            |                   |                                       |
|     |         |              | ar payments.   | 1                                     | 2.         | \$                | 200.00                                |
| 13. | Ente    | rtainment,   | clubs, recreation, newspapers, magazine  | es, and books 1                       | 3.         | \$                | 0.00                                  |
| 14. | Char    | itable cont  | ributions and religious donations  | 1                                     | 4.         | \$                | 0.00                                  |
| 15. | Insur   | rance.       |  |                                       |            |                   |                                       |
|     |         |              | surance deducted from your pay or include  |                                       |            |                   |                                       |
|     |         | Life insura  |  | _                                     | a.         | *                 | 0.00                                  |
|     | 15b.    | Health ins   | urance   | 15                                    | b.         | \$                | 0.00                                  |
|     | 15c.    | Vehicle in   | surance  | 15                                    | c.         | \$                | 100.00                                |
|     |         |              | rance. Specify:  |                                       | id.        | \$                | 0.00                                  |
| 16. |         |              | clude taxes deducted from your pay or inclu  |                                       | _          | _                 |                                       |
|     | Spec    | ,            |  | 1                                     | 6.         | \$                | 0.00                                  |
| 17. |         |              | ease payments:   | 4-7                                   |            | •                 | 0.00                                  |
|     |         |              | ents for Vehicle 1   |                                       | a.         |                   | 0.00                                  |
|     |         |              | ents for Vehicle 2   |                                       | b.         |                   | 0.00                                  |
|     |         | Other. Spe   | -  |                                       | c.         |                   | 0.00                                  |
| 4.0 |         | Other. Spe   | -  |                                       | d.         | \$                | 0.00                                  |
| 18. |         |              | of alimony, maintenance, and support the your pay on line 5, Schedule I, Your Inco |                                       | 8.         | \$                | 0.00                                  |
| 19  |         |              | s you make to support others who do no   | <i>ine</i> (Oilloidi i Oilli 1001).   | ٠.         | \$                | 0.00                                  |
| 10. | Spec    |              | you make to support others who do no   | •                                     | 9.         | <b>—</b>          | 0.00                                  |
| 20  |         | ·            | erty expenses not included in lines 4 or   |                                       |            | ur Income         |                                       |
| _0. |         |              | s on other property  |                                       | .о<br>)а.  |                   | 0.00                                  |
|     |         | Real estat   |  |                                       | b.         | ·                 | 0.00                                  |
|     | 20c.    | Property, I  | nomeowner's, or renter's insurance   | 20                                    | )c.        | \$                | 0.00                                  |
|     |         |              | ice, repair, and upkeep expenses   |                                       | d.         |                   | 0.00                                  |
|     |         |              | er's association or condominium dues   | 20                                    | e.         | \$                | 0.00                                  |
| 21. |         | r: Specify:  |  |                                       |            | +\$               | 0.00                                  |
|     |         |              |  |                                       | ۱          |                   | 0.00                                  |
| 22. |         |              | monthly expenses   |                                       |            |                   |                                       |
|     |         |              | through 21.  |                                       |            | \$                | 1,662.53                              |
|     | 22b. (  | Copy line 2: | 2 (monthly expenses for Debtor 2), if any, fr                                      | om Official Form 106J-2               |            | \$                |                                       |
|     | 22c. /  | Add line 22a | a and 22b. The result is your monthly expe   | nses.                                 |            | \$                | 1,662.53                              |
| 22  | Calc    | ulato vour i | monthly net income.  |                                       | Į          |                   |                                       |
| 23. |         | -            | 12 (your combined monthly income) from S   | shodulo I                             | a.         | ¢                 | 1,877.53                              |
|     |         | . ,          | monthly expenses from line 22c above.  |                                       | ba.<br>Bb. |                   | · · · · · · · · · · · · · · · · · · · |
|     | ۷۵۵.    | Copy your    | monany expenses nom line 220 above.  | 23                                    | .U.        | Ψ                 | 1,662.53                              |
|     | 23c     | Subtract v   | our monthly expenses from your monthly in  | rome                                  |            |                   |                                       |
|     | 200.    |              | is your <i>monthly net income</i> .  | 23                                    | 3c.        | \$                | 215.00                                |
|     |         |              | •  |                                       | ١          |                   |                                       |
| 24. |         |              | an increase or decrease in your expense  |                                       |            |                   |                                       |
|     |         |              | ou expect to finish paying for your car loan within t                              | he year or do you expect your mortgag | ge p       | ayment to increas | e or decrease because of a            |
|     |         |              | terms of your mortgage?  |                                       |            |                   |                                       |
|     | ■ No    |              |  |                                       |            |                   |                                       |
|     | □ Ye    | es.          | Explain here:  |                                       |            |                   |                                       |

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| Fill in this infor              | mation to identify your                        | case:                    |                             |                                      |                   |
|---------------------------------|--|--------------------------|-----------------------------|--------------------------------------|-------------------|
| Debtor 1                        | Toshira Myles                                  |                          |                             |                                      |                   |
|                                 | First Name                                     | Middle Name              | Last Name                   |                                      |                   |
| Debtor 2<br>(Spouse if, filing) | First Name                                     | Middle Name              | Last Name                   |                                      |                   |
|                                 |  |                          |                             |                                      |                   |
| United States Ba                | ankruptcy Court for the:                       | NORTHERN DISTRICT        | OF ILLINOIS                 |                                      |                   |
| Case number                     |  |                          |                             |                                      |                   |
| (if known)                      |  |                          |                             | ☐ Che                                | ck if this is an  |
|                                 |  |                          |                             | ame                                  | nded filing       |
|                                 |  |                          |                             |                                      |                   |
|                                 |  |                          |                             |                                      |                   |
| Official Forn                   | <u>m 106Dec</u>                                |                          |                             |                                      |                   |
| <b>Declarat</b>                 | tion About a                                   | ın Individual            | <b>Debtor's Scl</b>         | hedules                              | 12/15             |
|                                 |  |                          |                             |                                      |                   |
| years, or both. 1               | 8 U.S.C. §§ 152, 1341, 1                       |                          | waptey case can result in   | n fines up to \$250,000, or imprison | ment for up to 20 |
| Did you pa                      | y or agree to pay some                         | one who is NOT an attor  | ney to help you fill out ba | ankruptcy forms?                     |                   |
| ■ No                            |  |                          |                             |                                      |                   |
| □ Yes. N                        | Name of person                                 |                          |                             | Attach Bankruptcy Petition           | Preparer's Notice |
|                                 |  |                          |                             | Declaration, and Signature           |                   |
|                                 |  |                          |                             |                                      |                   |
|                                 | alty of perjury, I declare e true and correct. | that I have read the sum | mary and schedules filed    | l with this declaration and          |                   |
| V /-/ T                         | latina NA da a                                 |                          | V                           |                                      |                   |
| X /s/ Tos                       | nıra Myles<br>a Myles                          |                          | X<br>Signature of D         | Debtor 2                             |                   |
|                                 | re of Debtor 1                                 |                          | Signature of L              | 505t01 Z                             |                   |
| - 3                             |  |                          |                             |                                      |                   |
| Date _                          | July 19, 2017                                  |                          | Date                        |                                      |                   |

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| -#11              | l in this inform                               | nation to identify yo                      | ur caso:                                   |   |  |   |
|-------------------|--|--|--|---|--|---|
|                   |  |  | ui case.                                   |   |  |   |
| De                | btor 1   | Toshira Myles First Name                   | Middle Name                                | Last Name   |  |   |
| _                 | btor 2   | First Name                                 | Middle News                                | Look Name   |  |   |
| (Spo              | ouse if, filing)                               | First Name                                 | Middle Name                                | Last Name   |  |   |
| Un                | ited States Bar                                | nkruptcy Court for the                     | e: NORTHERN DISTRICT                       | OF ILLINOIS   |  |   |
|                   | se number<br>nown)                             |  |  |   | С  | Check if this is an amended filing                    |
|                   | ficial For                                     |  | Affairs for Indivi                         | duals Filing for B  | ankruptcy                                  | 4/10  |
| info<br>nun       | ormation. If m                                 | ore space is needed<br>n). Answer every qu | d, attach a separate sheet to estion.      | are filing together, both are of this form. On the top of any                                   |  |   |
| 1.<br>1.          |  |  | Marital Status and Where Yo                | u Livea Before  |  |   |
| ١.                | what is your                                   | current marital sta                        | tus :                                      |   |  |   |
|                   | <ul><li>□ Married</li><li>■ Not mar</li></ul>  | ried                                       |  |   |  |   |
| 2.                | During the la                                  | ast 3 years, have yo                       | u lived anywhere other thar                | where you live now?   |  |   |
|                   | □ No   |  |  |   |  |   |
|                   | _  | t all of the places you                    | ı lived in the last 3 years. Do ı          | not include where you live now  | I.   |   |
|                   | Debtor 1 Pr                                    | ior Address:                               | Dates Debtor                               | 1 Debtor 2 Prior Ad   | dress:                                     | Dates Debtor 2  |
|                   | 7423 N Cla<br>Apt 3<br>Chicago, IL             | •  | From-To:<br>2011-2014                      | ☐ Same as Debtor  | I  | ☐ Same as Debtor 1 From-To:                           |
| <b>3.</b><br>stat | es and territori                               | es include Árizona, C                      | California, Idaho, Louisiana, N            | egal equivalent in a commun<br>evada, New Mexico, Puerto R                                      | , , ,                                      |   |
| Pa                |  | n the Sources of Yo                        | chedule H: Your Codebtors (C               | Эпісіаі Form 106H).   |  |   |
| 4.                | Did you have Fill in the tota If you are filin | e any income from o                        | employment or from operati                 | ing a business during this you all businesses, including partive together, list it only once ur | time activities.                           | calendar years?                                       |
|                   |  |  | Debtor 1                                   |   | Debtor 2                                   |   |
|                   |  |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |

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Case number (if known) Document

Debtor 1 Toshira Myles

|   |  | ח  | ebtor 1  |  | Debtor 2  |   |
|---|--|--|--|--|---|---|
|   |  | S  | ources of income<br>heck all that apply.   | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>and exclusions)   |
|   | ry 1 of current ye<br>ı filed for bankrup  | atov:  | Wages, commissions, onuses, tips   | \$14,798.87  | ☐ Wages, commissions, bonuses, tips   |   |
|   |  |  | Operating a business   |  | ☐ Operating a business  |   |
| For last cale<br>January 1 to                         | endar year:<br>o December 31, 2  | M16 \  | Wages, commissions, onuses, tips   | \$19,036.00  | ☐ Wages, commissions, bonuses, tips   |   |
|   |  |  | Operating a business   |  | ☐ Operating a business  |   |
|   | ndar year before<br>o December 31, 2   | 015\   | Wages, commissions, onuses, tips   | \$3,995.00   | ☐ Wages, commissions, bonuses, tips   |   |
|   |  |  | Operating a business   |  | ☐ Operating a business  |   |
| □ No<br>■ Yes   | . Fill in the details.   |  |  |  |   |   |
| Yes   | s. Fill in the details.  |  |  |  |   |   |
| . 30  |  | Sc   | ebtor 1<br>ources of income  | Gross income from  | Debtor 2<br>Sources of income   | Gross income  |
| - 30  |  | Sc   |  | Gross income from each source (before deductions and exclusions)   |   | Gross income<br>(before deductions<br>and exclusions)   |
| For the caler   | ndar year before<br>o December 31, 2   | So<br>De<br>that: U  | ources of income   | each source<br>(before deductions and  | Sources of income   | (before deductions  |
| or the caler<br>January 1 to<br>art 3: Lis            | o December 31, 2 st Certain Payme er Debtor 1's or E Neither Debtor  | that: Ui<br>2015)<br>nts You Ma<br>Debtor 2's d  | curces of income escribe below.  nemployment  de Before You Filed for I  | each source (before deductions and exclusions) \$4,213.00  Bankruptcy r debts? umer debts. Consumer debts  | Sources of income<br>Describe below.  | (before deductions and exclusions)  |
| or the caler<br>January 1 to<br>art 3: Lis            | st Certain Payme er Debtor 1's or E Neither Debtor individual prima During the 90 d  | that: United that: United that: United that: United that: United that the that that the that that the that that  | purces of income escribe below.  nemployment  de Before You Filed for I lebts primarily consumer for 2 has primarily consumer  | each source (before deductions and exclusions) \$4,213.00  Bankruptcy r debts? umer debts. Consumer debts  | Sources of income Describe below.  are defined in 11 U.S.C. § 10  | (before deductions and exclusions)  |
| or the caler<br>January 1 to<br>art 3: Lis            | st Certain Payme er Debtor 1's or Debtor 1's | that: United that: United that: 2015 )  Ints You Ma Debtor 2's don't nor Debtor arily for a period to line 7. It below each do that credit   | purces of income escribe below.  nemployment  de Before You Filed for I  lebts primarily consumer tor 2 has primarily consumersonal, family, or household you filed for bankruptcy, dien creditor to whom you paid or. Do not include payments   | each source (before deductions and exclusions) \$4,213.00  Bankruptcy  r debts? Imer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,425* or more in this for domestic support obligation.  | Sources of income Describe below.  are defined in 11 U.S.C. § 10 of \$6,425* or more?   | (before deductions and exclusions)  21(8) as "incurred by a the total amount you                          |
| or the caler<br>January 1 to<br>art 3: Lis            | st Certain Payme er Debtor 1's or Debtor 1's | that: United that: United that: United that: 2015)  Ints You Ma Debtor 2's don't nor Debtor arily for a period to line 7. It below each do that credit it include pay  | nemployment  de Before You Filed for I  lebts primarily consumer tor 2 has primarily consures rsonal, family, or househol you filed for bankruptcy, die  n creditor to whom you pai or. Do not include paymen yments to an attorney for the  | each source (before deductions and exclusions) \$4,213.00  Bankruptcy  r debts? Imer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,425* or more in this for domestic support obligation.  | are defined in 11 U.S.C. § 10 of \$6,425* or more?  | (before deductions and exclusions)  21(8) as "incurred by a the total amount you and alimony. Also, do    |
| or the caler January 1 to  art 3: Lis  Are eithe  No. | st Certain Payme er Debtor 1's or Debtor 1's | that: United States of the sta | purces of income escribe below.  Inemployment  Ide Before You Filed for Idebts primarily consumer for 2 has primarily consumers from 1 household you filed for bankruptcy, dient creditor to whom you pain or. Do not include payment for an attorney for the 4/01/19 and every 3 years oth have primarily consumptions.   | each source (before deductions and exclusions) \$4,213.00  Bankruptcy r debts? Imer debts. Consumer debts id purpose." d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. s after that for cases filed on other cases and the source of | are defined in 11 U.S.C. § 10 of \$6,425* or more?  n one or more payments and the ations, such as child support a part of after the date of adjustments. | (before deductions and exclusions)  21(8) as "incurred by another total amount you and alimony. Also, do  |
| or the caler January 1 to  art 3: Lis  Are eithe  No. | st Certain Payme er Debtor 1's or Debtor 1's Open 1's Ope | that: United States of the sta | purces of income escribe below.  Inemployment  Ide Before You Filed for Idebts primarily consumer for 2 has primarily consumers from 1 household you filed for bankruptcy, dient creditor to whom you pain or. Do not include payment for an attorney for the 4/01/19 and every 3 years oth have primarily consumptions.   | each source (before deductions and exclusions) \$4,213.00  Bankruptcy  r debts? Imer debts. Consumer debts Id purpose."  d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on other debts.   | are defined in 11 U.S.C. § 10 of \$6,425* or more?  n one or more payments and the ations, such as child support a part of after the date of adjustments. | (before deductions and exclusions)  21(8) as "incurred by a the total amount you and alimony. Also, do    |
| or the caler lanuary 1 to art 3: Lis Are eithe No.    | st Certain Payme er Debtor 1's or Debtor 1's Conditional Primary 1's Subject to add 1's Debtor 1 or Debtor 1's Conditional Primary 1's Conditional P | that: United States of the International Community of the Inte | purces of income escribe below.  Inemployment  Ide Before You Filed for Idebts primarily consumer tor 2 has primarily consumersonal, family, or household you filed for bankruptcy, did not creditor to whom you paid or. Do not include payment ments to an attorney for the 4/01/19 and every 3 years oth have primarily consumous filed for bankruptcy, did not creditor to whom you paid to cre | each source (before deductions and exclusions) \$4,213.00  Bankruptcy  r debts? Imer debts. Consumer debts Id purpose."  d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on other debts.   | are defined in 11 U.S.C. § 10 of \$6,425* or more?  In one or more payments and thations, such as child support a payment of \$600 or more?               | (before deductions and exclusions)  21(8) as "incurred by a the total amount you and alimony. Also, do t. |

paid

still owe

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|----------|---------------|---|
|          |               |   |

| 7.  | Within 1 year before you filed for bankrupto<br>Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony. | rtners; relatives of any gene<br>control, or owner of 20% or | eral partners; partne<br>more of their voting | rships of which you<br>securities; and ar | u are a genera<br>ny managing a | al partner; corporations<br>agent, including one for |
|-----|---|--|---|---|---------------------------------|--|
|     | No  |  |   |   |                                 |  |
|     | Yes. List all payments to an insider.  Insider's Name and Address   | Dates of navment   | Total amount                                  | Amount you                                | Passan for                      | this novement  |
|     | insider's Name and Address  | Dates of payment   | paid  | Amount you still owe                      | Reason for                      | this payment   |
| 8.  | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi  No Yes. List all payments to an insider   | •                      | nents or transfer a                           | ny property on ac                         | ccount of a d                   | ebt that benefited an                                |
|     | ☐ Yes. List all payments to an insider  Insider's Name and Address  | Dates of payment   | Total amount                                  | Amount you                                | Reason for                      | this payment   |
|     | insider 5 Name and Address  | Dates of payment   | paid  | still owe                                 | Include cred                    |  |
| Par | rt 4: Identify Legal Actions, Repossession  | s, and Foreclosures  |   |   |                                 |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.   |  |   |   |                                 |  |
|     | Case title<br>Case number   | Nature of the case   | Court or agency                               |   | Status of th                    | ne case  |
| 10. | Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  ■ No. Go to line 11.  □ Yes. Fill in the information below.  Creditor Name and Address                  |  | rty repossessed, fo                           | oreclosed, garnis                         | hed, attache                    | d, seized, or levied?  Value of the                  |
|     |   |  |   |   |                                 | property   |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No  Yes. Fill in the details.   |  |   | ancial institution                        | , set off any a                 | amounts from your                                    |
|     | Creditor Name and Address   | Describe the action the                                      | creditor took                                 | Date a                                    | action was                      | Amount   |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes  |  | rty in the possessi                           |   |                                 | efit of creditors, a                                 |
| Par | rt 5: List Certain Gifts and Contributions  |  |   |   |                                 |  |
| 13. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.   | tcy, did you give any gifts                                  | with a total value                            | of more than \$600                        | 0 per person                    | ?  |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts   |   | Dates<br>the gi                           | you gave<br>fts                 | Value  |
|     | Person to Whom You Gave the Gift and Address:   |  |   |   |                                 |  |

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| 14. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co                                       |        | , did you give any gifts or contributions with a tota   | al value of more than                   | s \$600 to any charity?   |
|-----|---|--------|---|---|---------------------------|
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code | otal   | Describe what you contributed   | Dates you contributed                   | Value                     |
| Par | t 6: List Certain Losses  |        |   |   |                           |
| 15. | Within 1 year before you filed for bankrup or gambling?   | ptcy c | or since you filed for bankruptcy, did you lose any   | thing because of the                    | ft, fire, other disaster, |
|     | ■ No □ Yes. Fill in the details.  |        |   |   |                           |
|     |   | Includ | tribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property. | Date of your loss                       | Value of property lost    |
| Par | t 7: List Certain Payments or Transfers   | 3      |   |   |                           |
| 16. | consulted about seeking bankruptcy or p   | orepai | did you or anyone else acting on your behalf pay ring a bankruptcy petition?<br>ers, or credit counseling agencies for services require         |   | erty to anyone you        |
|     | □ No ■ Yes. Fill in the details.  |        |   |   |                           |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo                                  | ou .   | Description and value of any property transferred   | Date payment or transfer was made       | Amount of payment         |
|     | STAHULAK & ASSOCIATES, L.L.C<br>53 W. Jackson Blvd., Suite 652<br>Chicago, IL 60604   |        | \$310.00 (\$310.00 filing fee)  | 7/5/17                                  | \$310.00                  |
|     | CC Advising, Inc.<br>703 Washington Ave.<br>Ste 200<br>Bay City, MI 48708   |        | \$9.76 credit counseling  | 7/13/17                                 | \$9.76                    |
|     | STAHULAK & ASSOCIATES, L.L.C<br>53 W. Jackson Blvd., Suite 652<br>Chicago, IL 60604   |        | attorney fee paid through case # 15-22851 through Trustee distribution  | 8/19/16-4/21/1<br>7                     | \$2,181.40                |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that  No   | litors |   | or transfer any prope                   | erty to anyone who        |
|     | ☐ Yes. Fill in the details.   |        |   |   |                           |
|     | Person Who Was Paid<br>Address  |        | Description and value of any property transferred   | Date payment<br>or transfer was<br>made | Amount of payment         |
|     |   |        |   |   |                           |

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| 18. | Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread  No | usiness or financial affa<br>ade as security (such as                    | airs?<br>the granting of a |             |   |   |
|-----|--|--|----------------------------|-------------|---|---|
|     | ☐ Yes. Fill in the details.  |  |                            |             |   |   |
|     | Person Who Received Transfer Address   | Description and v  |                            | payme       | ibe any property or<br>ents received or debts<br>n exchange   | Date transfer was made                        |
|     | Person's relationship to you   |  |                            |             |   |   |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  No  |  | ny property to a           | self-settle | d trust or similar device                                     | of which you are a                            |
|     | ☐ Yes. Fill in the details.  |  |                            |             |   |   |
|     | Name of trust  | Description and v  | alue of the pro            | perty trans | ferred  | Date Transfer was made                        |
| Par | t 8: List of Certain Financial Accounts, Ins   | struments, Safe Deposi   | t Boxes, and St            | orage Unit  | s   |   |
| 20. | sold, moved, or transferred?   |  |                            |             |   |   |
|     | Include checking, savings, money market, o houses, pension funds, cooperatives, association No   |  |                            |             | r, snares in banks, credi                                     | t unions, brokerage                           |
|     | Yes. Fill in the details.  |  |                            |             |   |   |
|     | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   | Last 4 digits of account number  | Type of account instrument | unt or      | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  | year before you filed for  | bankruptcy, ar             | ny safe dep | oosit box or other depos                                      | itory for securities,                         |
|     | ■ No □ Yes. Fill in the details.   |  |                            |             |   |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, S<br>State and ZIP Code)            |                            | Describe    | the contents  | Do you still have it?                         |
| 22. | Have you stored property in a storage unit of  | or place other than you  | home within 1              | year befor  | e you filed for bankrupt                                      | cy?   |
|     | ■ No □ Yes. Fill in the details.   |  |                            |             |   |   |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | Who else has or l<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                            | Describe    | the contents  | Do you still have it?                         |
| Par | t 9: Identify Property You Hold or Control   | for Samoona Elas   |                            |             |   |   |
| 23. |  |  | ude any propert            | ty you borr | owed from, are storing  | for, or hold in trust                         |
|     | ■ No □ Yes. Fill in the details.   |  |                            |             |   |   |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the prop<br>(Number, Street, City, S<br>Code)                   |                            | Describe    | the property  | Value   |
|     | t 10: Give Details About Environmental Info  | ormation   |                            |             |   |   |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

|     | hazardous material, pollutant, contaminant, or similar term. |  |  |          |  |                    |  |  |
|-----|--|--|--|----------|--|--------------------|--|--|
| Rep | ort a  | all notices, releases, and proceedings that  | at you know about, regardless of wher                                      | the      | y occurred.                                    |                    |  |  |
| 24. | Has  | any governmental unit notified you that  | you may be liable or potentially liable                                    | und      | er or in violation of an environme             | ntal law?          |  |  |
|     |  | No   |  |          |  |                    |  |  |
|     | Yes. Fill in the details.                                    |  |  |          |  |                    |  |  |
|     |  | me of site<br>dress (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | t        | Environmental law, if you know it              | Date of notice     |  |  |
| 25. | Hav  | re you notified any governmental unit of   | any release of hazardous material?   |          |  |                    |  |  |
|     | ■ No □ Yes. Fill in the details.                             |  |  |          |  |                    |  |  |
|     |  | me of site<br>dress (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) |          | Environmental law, if you know it              | Date of notice     |  |  |
| 26. | Hav  | re you been a party in any judicial or adn   | ninistrative proceeding under any envi                                     | ronn     | nental law? Include settlements a              | nd orders.         |  |  |
|     | ■ No □ Yes. Fill in the details.                             |  |  |          |  |                    |  |  |
|     |  | se Title<br>se Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nat      | ure of the case                                | Status of the case |  |  |
| Par | t 11:  | Give Details About Your Business or  | Connections to Any Business  |          |  |                    |  |  |
|     |  | _  |  | v of     | the following connections to any               | husiness?          |  |  |
| 27. | VVIL   | hin 4 years before you filed for bankrupt  A sole proprietor or self-employed ii   | • •  | -        | •  | Dusiliess :        |  |  |
|     |  | ☐ A member of a limited liability comp   |  |          | -  |                    |  |  |
|     |  | ☐ A partner in a partnership   | any (220) or miniou habitity parational                                    | .p (=    | <b>-</b> . ,                                   |                    |  |  |
|     |  |  | ecutive of a corporation   |          |  |                    |  |  |
|     |  | <ul><li>☐ An officer, director, or managing executive of a corporation</li><li>☐ An owner of at least 5% of the voting or equity securities of a corporation</li></ul> |  |          |  |                    |  |  |
|     |  | No. None of the above applies. Go to F   |  |          |  |                    |  |  |
|     | _  | Yes. Check all that apply above and fill   |  | <b>.</b> |  |                    |  |  |
|     | Bu   | siness Name  | Describe the nature of the business  | -        | Employer Identification number                 |                    |  |  |
|     |  | dress mber, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   |          | Do not include Social Security number or ITIN. |                    |  |  |
|     |  |  |  |          | Dates business existed                         |                    |  |  |
| 28. |  | hin 2 years before you filed for bankrupt<br>citutions, creditors, or other parties.   | cy, did you give a financial statement t                                   | o an     | yone about your business? Inclu                | de all financial   |  |  |
|     |  | No   |  |          |  |                    |  |  |
|     |  | Yes. Fill in the details below.  |  |          |  |                    |  |  |
|     | Ad   | me<br>dress<br>mber, Street, City, State and ZIP Code)   | Date Issued  |          |  |                    |  |  |
| _   | _  |  |  |          |  |                    |  |  |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Toshira Myles                      |   |
|--|---|
| Toshira Myles                          | Signature of Debtor 2   |
| Signature of Debtor 1                  |   |
| <b>Date</b> July 19, 2017              | Date  |
| Did you attach additional p ■ No □ Yes | pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pa             | y someone who is not an attorney to help you fill out bankruptcy forms?                                 |
| ■ No                                   |   |
| ☐ Yes. Name of Person                  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).       |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - Debtor's attorney received \$310.00 from Debtor(s) prior to filing of the case as an advanced payment in compensation of (1) analysis of financial situation; (2) consultation on various bankruptcy and non-bankruptcy options; (3) preparation of documents; (4) payment of filing fees; and, when applicable (5) payment of costs of credit report fees.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:July 19, 2017                     | · · · · · · · · · · · · · · · · · · · |  |
|--|---------------------------------------|--|
| Signed:                                |                                       |  |
| /s/ Toshira Myles                      | /s/ Thomas G. Stahulak                |  |
| Toshira Myles                          | Thomas G. Stahulak 6288620            |  |
|  | Attorney for the Debtor(s)            |  |
| Debtor(s)                              |                                       |  |
| Do not sign this agreement if the amou | nts are blank.                        |  |

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

| In re  | Toshira Myles   |   | Case No.   |  |
|--------|---|---|--|--|
|        | •   | Debtor(s)   | Chapter  | 13   |
|        | DISCLOSURE OF COMPE   | NSATION OF ATTOR  | NEY FOR DE   | CBTOR(S)   |
| (      | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of  | ng of the petition in bankruptcy, or  | r agreed to be paid  | to me, for services rendered or to               |
|        | For legal services, I have agreed to accept   |   | . \$   | 4,000.00   |
|        | Prior to the filing of this statement I have received.  |   |  | 0.00   |
|        | Balance Due   |   | . \$   | 4,000.00   |
| 2. 5   | 310.00 of the filing fee has been paid.   |   |  |  |
| 3.     | The source of the compensation paid to me was:  |   |  |  |
|        | ■ Debtor □ Other (specify):   |   |  |  |
| 4.     | The source of compensation to be paid to me is:   |   |  |  |
|        | ■ Debtor □ Other (specify):   |   |  |  |
| 5.     | ■ I have not agreed to share the above-disclosed comp   | ensation with any other person ur   | nless they are memb  | pers and associates of my law firm.              |
|        | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name  |   |  |  |
| 6.     | In return for the above-disclosed fee, I have agreed to re  | ender legal service for all aspects of  | of the bankruptcy c  | ase, including:                                  |
| l<br>o | a. Analysis of the debtor's financial situation, and render to Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credited. [Other provisions as needed]  Negotiations with secured creditors to reduce agreements and applications as needed; por liens on household goods. | ement of affairs and plan which nors and confirmation hearing, and the to market value; exemption | nay be required;<br>any adjourned hear<br>planning; prepar | rings thereof; ation and filing of reaffirmation |
| 7. ]   | By agreement with the debtor(s), the above-disclosed fer<br>Representation of the debtors in any discharacteristics adversary proceeding.   | e does not include the following sargeability actions, judicial lien                              | ervice:<br>avoidances, relie                               | f from stay actions or any other                 |
|        |   | CERTIFICATION   |  |  |
|        | certify that the foregoing is a complete statement of an ankruptcy proceeding.  | y agreement or arrangement for p  | ayment to me for re  | epresentation of the debtor(s) in                |
| Jı     | uly 19, 2017  | /s/ Thomas G. Stahu   | ılak   |  |
|        | ate   | Thomas G. Stahulak  |  |  |
|        |   | Signature of Attorney Stahulak & Associat   | es. L.L.C. / GetFi   | led  |
|        |   | 53 W. Jackson Blvd.   |  | · • •  |
|        |   | Chicago, IL 60604   |  |  |
|        |   | (312) 662-1480 Fax<br>ecf@stahulakandass  | ` '  |  |
|        |   | Name of law firm  | อบบเลเซอ.bUIII   |  |
|        |   |   |  |  |

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### **United States Bankruptcy Court** Northern District of Illinois

| In re | Toshira Myles                                |   | Case No.                      | Case No.      |  |
|-------|--|---|-------------------------------|---------------|--|
|       |  | Debtor(s)   | Chapter 13                    |               |  |
|       | VER  | RIFICATION OF CREDITOR M                            | ATRIX                         |               |  |
|       |  | Number of Creditors: 2                              |                               |               |  |
|       | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of credit             | ors is true and correct to th | ne best of my |  |
| Date: | July 19, 2017                                | /s/ Toshira Myles Toshira Myles Signature of Debtor |                               |               |  |

Arnold Scott Harris, P.C. 111 W Jackson Blvd, Suite 600 Chicago, IL 60604

CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613

Chicago Department of Revenue 121 N. Lasalle Street Room 107A Chicago, IL 60602

City of Chicago \*
Department of Finance
P.O Box 88292
Chicago, IL 60680-1292

Commonwealth Edison 1919 SWIFT DR CLAIMS & COLLECTIONS Oak Brook, IL 60523

Commonwealth Financial 245 Main St Scranton, PA 18519

Credit Collection Services PO BOX 9136 Needham Heights, MA 02494

Debt Recovery Solutions, LLC 900 Merchants Concourse, Suite 106 Westbury, NY 11590

Dept of Ed/Sallie Mae 11100 Usa Pkwy Fishers, IN 46037

Eastern Account System 75 Glen Rd, Ste 119 Sandy Hook, CT 06482

First Premier Bank 601 S. Minnesota Sioux Falls, SD 57104

General Revenue Corp 1501 Northlake Dr. Cincinnati, OH 45249

Goldman and Grant 205 W Randolph Chicago, IL 60606

Harris & Harris 600 W. Jackson Blvd #400 Chicago, IL 60661

Jefferson Capital Systems LLC P.O. Box 772813 Chicago, IL 60677

Midland Funding 8875 Aero Dr STE 200 San Diego, CA 92123

National Louis University 120 South Michigan Ave Chicago, IL 60603

National Louis University Student Finance Office 1000 Capitol Dr Wheeling, IL 60090

People's Gas Light & Coke 200 E Randolph St Ste 20 Chicago, IL 60601

People's Gas Light & Coke 200 E Randolph St Chicago, IL 60601

Santander Consumer USA PO Box 560284 Dallas, TX 75356

Secretary of State Compliance Dept 2701 S Dirksen Pkwy Springfield, IL 62723

US Bank P.O. Box 790084 Saint Louis, MO 63179

Virtuoso Sourcing Group 4500 E Cherry Creek South Denver, CO 80246